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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10-25-10
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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: LUAR PRODUCTS CORP.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee
☒ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: RAUL R JIMENEZ

Name (Printed or typed)

1461 SEMINOLA BLVD.

Address

CASSELBERRY, FL 32707

City, State & Zip

407-697-2212

Daytime Telephone number

luarcabinets@hotmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME LUAR PRODUCTS CORP

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
1461 SEMINOLA BLVD. bLDG#3
CASSELBERRY, FL 32707

Mailing address, if different

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is: 1000 OF \$1.00 VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>RAUL R JIMENEZ PRESIDENT</u>	Name and Title: _____
Address: <u>1461 SEMINOLA BLVD.</u>	Address: _____
<u>CASSELBERRY, FL 32707</u>	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: RAUL R JIMENEZ
Address: 1461 SEMINOLA BLVD.
CASSELBERRY, FL 32707

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RAUL R JIMENEZ
Address: 1461 SEMINOLA BLVD.
CASSELBERRY, FL 32707

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent

10/16/10
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

10/16/10
Date