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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11 JAN 25 AM 11:17

SECRET

PS 1/27/11

COVER LETTER

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

SUBJECT: LUCKY DRAW INTERNET CAFE INC.

(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: BRENDA WALL

Name (Printed or typed)

411 WAUGHTOWN STREET

Address

WINSTON SALEM NC 27127

City, State & Zip

336-397-0283

Daytime Telephone number

LVSHARPE@AOL.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

LUCKY DRAW INTERNET CAFE INC.

The name of the corporation shall be:

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ARTICLE II PRINCIPAL OFFICE

Principal street address

1929 KNOX MCRAE DR

TITUSVILLE FL 32780

Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INTERNET CONNECTION SERVICE

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LISA SHARPE

Address: 1929 KNOX MCRAE DR

TITUSVILLE FL 32780

PRESIDENT

Name and Title: _____

Address: _____

Name and Title: LARRY CIGLIANO

Address: 1961 LAKE DR

WINSTON SALEM NC 27127

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: ERIC VAN CLEEF

Address: 527 TERRACEVIEW COVE #201

ALTAMONTE SPRINGS FL 32714

ARTICLE VII INCORPORATOR

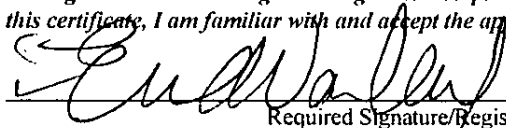
The name and address of the Incorporator is:

Name: BRENDA WALL

Address: 411 WAUGHTOWN STREET

WINSTON SALEM NC 27127

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

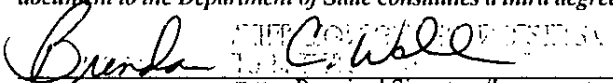


Required Signature/Registered Agent

17 JAN 2011

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

01/14/2011

Date