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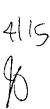
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COVER LETTER

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

SUBJECT: LCAM-D, INC) .	
(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the arti	icles of incorporation an	d a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
	ADDITIONAL CO	OPY REQUIRED
FROM: Samuel L.	Loftin Jr. e (Printed or typed)	
1689 Swe	etwood Dr.	
\$ 1.44 *	Address P. FL. 32935 State & Zip	
HP: (321) 253-9720/ Daytime T	CP: (321) 427 elephone number	-1615
Sloftinir E-mail address: (to be use	@aol.com d 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:	LCAM-D, II	NC.			
The name of the	corporation shall be:	=0, =,				
ARTICLE II	PRINCIPAL OFFICE					
	Principal street addr	ess	ı	Mailing address, i	f different is:	
	987 Sonesta Avenu	ie NE		Sweetwood [
	B106			urne, FL 329		
	Palm Bay, FL 3290	5		·		
ARTICLE III	PURPOSE					
	which the corporation is org	anized is:				
	ful Business	,				
a. Federa	al, State, or city Govern	ment Contracts or	Technical write	er/Advisor/La	nguage Trans	lator
	ed Own Investment,Re					
	ics, Procurement, Conf			Job/Personne	I Placement S	Service
d. Gover	nment or Commercial (Contract / Contracto	or Business.			
ARTICLE IV						
The number of s	hares of stock is: 20 Shar	es of Stock with n	o Par Value			
ARTICLE V	INITIAL OFFICERS	ND/OR DIRECTOR	.c			
	Title:Samuel L. Loft	n Jr.		: Manager (Mar)	
Address:	987 Sonesta A	venue NE	_ Address:			
	B106		_		 	
	Palm Bay, FL 3	32905	-			
Name and	Title: Tommie N. Lof	tin	Name and Title	:Technical [Director (Dir	r)
Address:	987 Sonesta A	venue NF	Address:		<u> </u>	
	B106		- -			
	Palm Bay, FL 3	2905	<u>-</u>	- 		
Name and	Title: Yueh C. Loftin		Name and Title:	· Rueinace /	Advisor (10	Δ
Address:	987 Sonesta A	venue NE	Address:	· Dusiness-A	NUVISOR (IC	/
	B106					
	Palm Bay, FL.	32905	_ ,			
ARTICLE VI	REGISTERED AGEN	T				
	lorida street address (P.O. I		the registered ager	nt is:		
Name:	Samuel L. Lof	tin Jr.			38 =	
Address:	1689 Sweetw	ood Dr.	-		₹8 ₹	
	Melbourne, F	L 32935	-		海 为	
ARTICLE VII	INCORPORATOR					The
The <u>name and a</u>	ddress of the Incorporator is:				⁶ μ. ←	
Name:	Samuel L. Lof		-		D E	
Address:	1689 Sweetwo	od Dr.	-		<u> </u>	<u> </u>
	Melbourne, F	32935	-	Ť	강해 🚫	
Having been na	med as registered agent to a	ccept service of process	for the above sta	ted corporation a	t the place desig	nated in
	am familiar with and accept					
-1		11.			n ./ /	1 001
Nami	nd O. of	Effen 9/1.		Ŀ	April 11	2011
	Required Signatur	Registered Agent			/ Date	,
submit this do	cument and affirm that the	facts stated herein are	true. I am aware	that the false in	formation submi	tted in a
	Department of State constitu					
1	1) -/ -	PIA-	1		A . J .	1011
Ham		Men M	7 <u>. </u>	/	April 11 Date	1, 2011
	Required Signat	ure Incorporator			/ Date /	,
		1/ //				