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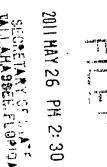
(Re	questor's Name)					
(Ad	dress)					
——————————————————————————————————————	dress)					
(City/State/Zip/Phone #)						
PICK-UP	WAIT	MAIL				
(Bu	siness Entity Nar	me)				
(Do	cument Number)	•				
Certified Copies	_ Certificates	s of Status				
Special Instructions to	Filing Officer:					





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ex 5/31

COVER LETTER

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

SUBJECT: Lenclass Enterprise, In	IC. TE NAME – <u>MUST INCLUDE SUFFIX</u>)	
· (FROPOSED CORPORA	TE NAME - MUST INCLUDE SUFFIA)	
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:	
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status	
	ADDITIONAL COPY REQUIRED	
FROM: Classie Wallace	e (Printed or typed)	
6708 Westlake Blvd		
Orlando, Fl 32810	Address State & Zip	-
407 271-6172 Daytime T	Telephone number	
wallace.classie16@gmai	il.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 Lenclass Enterprise, Inc	c				
	corporation shall be:	G .				
ARTICLE II	PRINCIPAL OFFICE					
	Principal street address		Mailing address,	if different	is:	
	6708 Westlake Blvd					
	Orlando, Fl 32810					
	PURPOSE r which the corporation is organized is:					
	new business					
	shares of stock is: 1000					
	INITIAL OFFICERS AND/OR DIRECTOR Title:Classie Wallace- owner		::Classie Wa	llace - CF	-0	
Address:	6708 Westlake Blvd		6708 Westla			
71441050.	Orlando, Fl 32810		Orlando, Fl			
Nama and	Title: Classie Wallace- President	Name and Title	Classie Wa	llace - Se	ecretar	v
Address:	6708 Westlake Blvd	Address:	6708 Westla	ske Blvd	, 0, 0 (a,	
rtaa. opg.	Orlando, FI 32810		Orlando, Fl			
		<u> </u>				
Nama and	I Title: Classie Wallace- Director	Name and Title	:Classie Wal	lace - tre	aei irai	-
Address:	6708 Westigke Blvd	Address:	6708 Westl			
	origndo, Fi 32810		Orlando, Fl			
		<u> </u>		Ter-1		
ARTICLE VI				<u>}~``</u> (;;;	201	
	Florida street address (P.O. Box NOT acceptable) o	of the registered age	ent is:	F (5) >> 3 €	35	AVERTO NA
Name:	Classie Wallace	_		三三	MAY	1 1
Address:	6708 Westlake Blvd	_		20.5	\sim	A HAMMA .
	Orlando, Fl 32810	_		<u>M</u>	6	
ARTICLE VI	I INCORPORATOR					أسأسا
The name and	address of the Incorporator is:			$= \frac{1}{2} U$	74	
Name:	Classie Wallace	_			$\ddot{\mathcal{S}}$. "
Address:	6708 Westlake Blvd Orlando, Fl 32810	_		kŌ mi ≱e	30	
	amed as registered agent to accept service of proce					ated in
tnis cerujicate, i	I am familiar with and accept the appointment as re	gisierea ageni ana	agree to act in tr	иѕ сирасну	•	•
Chan	ā Wallace		5	/20/2011		
<i></i>	Required Signature/Registered Agent		_	Da	ate	
	ocument and affirm that the facts stated herein are Department of State constitutes a third degree felor				submit	ted in a
11/	w Wallace			.5/	2/1/	
I ads	Required Signature/Incorporator			79	Yate	
	required Digitation invest position			, ,	,	