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MECHANISSEE FLORES

MPD 7/12

COVER LETTER

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

SUBJECT: LAKE Shore Consult 1.	NG GROUP, INC.
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
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 \$87.50 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
	ACU/O (Printed or typed)
3332 NE 190	1915 Address
	FL. 33180 State & Zip
• ′	331-6669 elephone number
	elephone number (a) Jalso. com I for future annual report notification)
E-mail address: (to be used	for future annual report notification)

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



RECEIVED

11 JUL 11 PM 2: 55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 27, 2011

CHARLES YACULLO 3332 NE 190TH ST #1915 AVENTURA, FL 33180 LSCD avotave, Inc.

SUBJECT: LAKE SHORE CONSULTING GROUP, INC.

Ref. Number: W11000034344

We have received your document for LAKE SHORE CONSULTING GROUP, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 511A00015408

ARTICLES OF INCORPORATION

In compliance with Chapt	ter 607 and/or Chapter 621, F.S. (Profit) AVENTURA, INC.
The name of the corporation shall be: LARE Show	RE CONSULTING GROUP THE.
ARTICLE II PRINCIPAL OFFICE	
Principal street address 3352 NF 190 & ST 1915 AYENTURA, F1. 33180	Mailing address, if different is:
ARTICLE III PURPOSE The purpose for which the corporation is organized is: \[\int_{O} \ pROVIDE \ \(\text{CON SULTING S.} \)	CERTICES FOR CLIENTS.
ARTICLE IV SHARES The number of shares of stock is: /0,000 ARTICLE V INITIAL OFFICERS AND/OR DE	RECTORS SECTIONS
Name and Title: Charles Yazullo Address: 3332 NE 190 & St AYENT DR a FL J	Name and Title: #1915 Address:
	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 ac Name: <u>Chorles Yacullo</u> Address: <u>3332 NE 190 th 37 th</u> AYENTURA, FL	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: Address	# 1915 33180
Having been named as registered agent to accept service this certificate. I am familiar with and accept the appoint	e of process for the above stated corporation at the place designated in ment as registered agent and agree to act in this capacity
Charles Gaculla	4/22111
Charles Jaculla Required Signature/Registered	Agent Date
submit this document and affirm that the facts stated	herein are true. I am aware that the false information submitted in a
locument to the Department of State constitutes a third di Liviles Jacullo Required Signature/Incomo	
Required Signature/Incorpo	rator Date