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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
	Office Use Onl	lv.

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COVER LETTER

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

LEDU & SON JNCOR PORATED (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) S CORPORATION **SUBJECT:**

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

Filing Fee & Certificate of Status

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

JOSE M. LEDO Name (Printed or typed) FROM: _ ŝ W. OKEECHOBE ROAD Address <u>۔</u> HiALeAh, FL 33012 PM 2: 597-7705 Daytime Telephone number ಎ

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 NA The name of the corpor	$\frac{AME}{\text{ration shall be: } LEDOB SON,$	JNC.	RATION)
ARTICLE II PR	RINCIPAL OFFICE	(5	j
_3	Principal <u>street</u> address 251 U. OICSE C. HUBE R HALCAN FL 33012	OAD.	
	RPOSE		
· · ·	h the corporation is organized is:		
TRANSP	o R1		
ARTICLE IV SH The number of shares o	IARES of stock is: ONE HUNDRED	(100)	
	ITIAL OFFICERS AND/OR DIRECTORS	Po	
Name and Title:	JOSE M: LEDO NE	ame and Title: PR4	ESIDENT
Address: _	<u>3251 W - OKEE CHOBEE</u> AC	Idress:	
-	HIALFAN FL 33012		
Address:	Na		
Address.		1dress.	
-			
Name and Titles	N	and Titles	
	Na		
_			
ARTICLE VI RE	GISTERED AGENT		
	street address (P.O. Box NOT acceptable) of the	registered agent is:	St. 2
Name:	LOSE M. LEDO	2 2	
Address:	3251 W- OKEECHOA	ER ROAD	2: E * n
	HALEAH - PL 33D/	2 –	
ARTICLE VII IN	CORPORATOR		το ³⁰
The name and address	s of the Incorporator is:		
Name:	1055 M. (4.00	ARE ROAD	
Address:	39651 W-VKERGAO	pte ·····	
	- Lose M. LED? - 3851 W- OKEECHO - HALEAL / FL 3301	2	2 d B
	is registered agent to accept service of process for miliar with and accept the appointment as registered	the above stated corporation	
TOAN) Part 1		A- NO 1-1.
TAXES	Jose M. 1	<u>redu</u>	07-09-20//
	Required Signature/Registered Agent		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.

. С. р

Required Signature/Incorporator

07-09-2011 Date