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\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

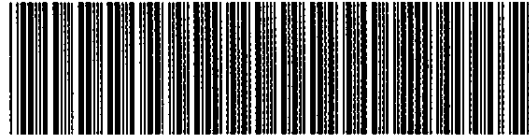
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 DEC -5 PM 1:30

Ps 12/6/11

**COVER LETTER**

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

(LAZZARA)  
SUBJECT: Lazzara Brick Pavers, 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: STEFANO J. LAZZARA  
Name (Printed or typed)  
4643 W. KENNEDY BLVD.  
Address  
TPA, FL. 33609  
City, State & Zip  
(813) 546-6843  
Daytime Telephone number  
SJLAZZAR@GMAIL.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**

The name of the corporation shall be:

LAZZARA BRICK PAVERS, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

4643 W. KENNEDY BLVD.  
TPA, FL. 33609

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

BRICK PAVERS SALES & INSTALLATION

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: STEFANO J. LAZZARA

Name and Title:

Address:

PRESIDENT / DIRECTOR

Address:

4643 W. KENNEDY BLVD.  
TPA, FL. 33609

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

**ARTICLE VI REGISTERED AGENT**

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

Name: STEFANO J. LAZZARA

Address:

4643 W. KENNEDY BLVD.  
TPA, FL 33609

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: STEFANO J. LAZZARA

Address:

4643 W. KENNEDY BLVD.  
TPA, FL 33609

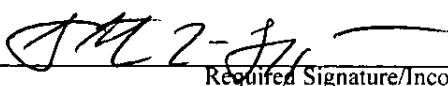
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

12/1/11  
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

12/1/11  
Date

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DIVISION OF CORPORATIONS  
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