

P12000016221

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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02/06/12--01044--001 \*\*78.75

W2-7367

FILED  
12 FEB 15 PM 4:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch FEB 16 2012

## COVER LETTER

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

SUBJECT: Int-Exports 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: Claudio Civitico  
Name (Printed or typed)  
2250 NW 170 Ave  
Address  
Pembroke Pines, Florida 33028  
City, State & Zip  
(754) 204-2635  
Daytime Telephone number  
claudiocivitico@hotmail.com  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

12 FEB 15 PM 1:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

February 7, 2012

CLAUDIO CIVITICO  
2250 NW 170 AVE  
PEMBROKE PINES, FL 33028

SUBJECT: INT-EXPORTS, INC.  
Ref. Number: W12000007367

We have received your document for INT-EXPORTS, INC. and your check(s) totaling \$78.75. 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

**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) 245-6928.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 812A00005197

**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: LUCIMA, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
2250 NW 170 Ave  
Pembroke Pines, FL 33028

Mailing address, if different is:  
2250 NW 170 Ave  
Pembroke Pines, FL 33028

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful Business

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Claudio Civitico  
Address: 2250 NW 170 Ave  
Pembroke Pines, FL 33028

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
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 acceptable) of the registered agent is:

Name: Claudio Civitico  
Address: 2250 NW 170 Ave  
Pembroke Pines, FL 33028

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Claudio Civitico  
Address: 2250 NW 170 Ave  
Pembroke Pines, FL 33028

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

Claudio Civitico  
Required Signature/Registered Agent

02/13/2012  
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.

Claudio Civitico  
Required Signature/Incorporator

02/13/2012  
Date

FILED  
12 FEB 15 PM 4:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA