

Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000051986 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

: CLARA GIRALDO, P.A. Account Name

Account Number : 119990000017

: (305)485-9300

Fax Number

<u>.</u>;2

: (305)485-1098

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:
----------------

## FLORIDA PROFIT/NON PROFIT CORPORATION LUGNA, CORP.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

RECEIVED FEB 2 7 2012

Electronic Filing Menu

Corporate Filing Menu

Help

T. Burch FEB 2 8 2012

H120000519863.

#### ARTICLES OF INCORPORATION

OF

### LUGNA, CORP.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporate, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

#### ARTICLE I

The name of this corporation shall be:

## LUGNA, CORP.

#### **ARTICLE II**

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

#### ARTICLE III

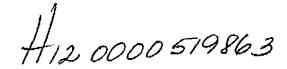
The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have powers: To have perpetual succession by its corporate

name:

LUGNA, CORP.

CLARA GIRALDO P.A. 4080 SW 84 AVE SUITE C MIAMI, FL 33155 (305) 485-9300 H12 0000 519863.



#### ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

RUBEN D. GOMEZ 2893 EXECUTIVE PARK DRIVE SUITE # 119 WESTON, FL. 33331

The principal office shall be:

2893 EXECUTIVE PARK DRIVE SUITE # 119
WESTON, FL. 33331

The mailing address shall be:

788 NW 170 TERRACE PEMBROKE PINES, FL. 33028

H120000 519863

H12 0000519863.

ARTICLE VI

The initial Board of Directors shall consist of a total of TWO(02) person, and the name and address of the person who is to serve as initial directors is:

ALBA CONSTANZA MUNOZ 2893 EXECUTIVE PARK DRIVE SUITE # 119 WESTON, FL. 33331

PRESIDENT

RUBEN D. GOMEZ 2893 EXECUTIVE PARK DRIVE SUITE # 119 WESTON, FL. 33331 VICEPRESIDENT

The name and address of the incorporator executing these Articles of Incorporation is

RUBEN D. GOMEZ 2893 EXECUTIVE PARK DRIVE SUITE # 119 WESTON, FL. 33331

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this 24 day of FEBRUARY, 2012

RUBEN D GOMEZ

H12 0000 519863

H12 000 0 5 1986 3

# CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, Submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The Name of the corporation is:

## LUGNA, CORP.

2. The Name and Address of the registered agent and office is:

RUBEN D. GOMEZ 2893 EXECUTIVE PARK DRIVE SUITE # 119 WESTON, FL. 33331 12 FEB 27 PM 12: 15
SECRETARY OF STATE
JAILLAHASSEE, FLOMINE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES. AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Dated: FEBRUARY 24, 2012

0000519863