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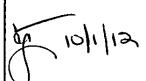


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SECRETARY OF STATE, SECRETARY OF STATE, THY IS I A GE CORPORATIONS



COVER LETTER

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

SUBJECT: Larry Lumley 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 \$78.75 Filing Fee & Certificate of Status \$78.75 \$87.50 Filing Fee & Certified Copy & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED		
FROM: Larry Lumley Name (Printed or typed)	•	
2804 Glassner Ave N.E. Address	12 S	JSIAIC 338
Palm Bay Fl. City, State & Zip	SEP 28	東海の大学
321-536-5888 Daytime Telephone number	PM 2: 20	OF STAI OF STAI
acrunit30@aol.com E-mail address: (to be used for future annual report notification)	0	20 20 20 20 20 20 20 20 20 20 20 20 20 2

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)

	In compliance with Chapter 607	and/or Chapter 621, F.S. (Pi	
ARTICLE I	NAME Larry Lumley Inc		SERBETARY OF STATE
The name of the cor	NAME Larry Lumley Inc. poration shall be:		MARITA DE L'ORGONACIO
	PRINCIPAL OFFICE		12 SEP 28 PM 2: 20
0.0	Principal street address		g address, if different is:
	804 Glassner Ave N.E.		I.S. 1 Unit #30
Pa	alm Bay Fl. 32905	Cocoa	
		FL.32926	
ARTICLE III F			
	onstruction contractors		
ARTICLE IV The number of share	, , , , , , , , , , , , , , , , , , , 		
APTICI E V	INITIAL OFFICERS AND/OR DIRECT	n p. g	
Address:	le:larry Lumley President 2804 Glassner Ave N.E.	Address:	
ridaress.	Palm Bay 32905		
	le:		
Address:			
	le:		
Address:			
ARTICLE VI I	REGISTERED AGENT		
	ida street address (P.O. Box NOT acceptable) of the registered agent is:	
Name:	Larry Lumley		•
Address:	2804 Glassner Ave N.F.		
. 144. 000	Palm Bay Fl. 32905		
ARTICLE VII	INCORPORATOR		
	ress of the Incorporator is:		
Name:	Larry Lumley		
Address:	2804 Glassner Ave N.E.		
	Palm Bay Fl . 32905		
	d as registered agent to accept service of pro- familiar with and accept the appointment as		
Zonn.	Lum lass		9/26/2012
7	Required Signature/Registered Agent		Date
Suhmit this docum	/ nent and affirm that the facts stated herein (are true I am aware that the	ha falsa information submittad in a
	partment of State constitutes a third degree fel		
Xanu	Lun lu		09/26/2012
	Required Signature/Incorporator	 	Date