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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850) 521-0821
Fax Number : (850) 558-1515

****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
LILINGA CORP.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

12 OCT 11 AM 10:55

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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gn 10/12/12

COVER LETTER

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

SUBJECT: LILINGA CORP.

(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: Jorge E. Otero, Esq.

Name (Printed or typed)

75 Valencia Avenue, Fourth Floor

Address

Coral Gables, FL 33134

City, State & Zip

305-567-9000

Daytime Telephone number

jeo@oterolaw.com

E-mail address: (to be used for future annual report notification)

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

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DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**ARTICLE I NAME** LILINGA CORP.

The name of the corporation shall be:

12 OCT 11 AM 10:55

ARTICLE II PRINCIPAL OFFICEPrincipal ~~street~~ address1121 Crandon Blvd., Unit D808
Key Biscayne, FL 33149

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

All lawful purposes.

ARTICLE IV SHARES

The number of shares of stock is: 10,000 shares.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: Andres Rocha, DirectorAddress: 1121 Crandon Blvd., Unit D808
Key Biscayne, FL 33149

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____


Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: Jorge E. Otero & Associates, P.A.Address: 75 Valencia Ave., Fourth Floor
Coral Gables, FL 33134**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: Jorge E. Otero, Esq.Address: 75 Valencia Ave., Fourth Floor
Coral Gables, FL 33134

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 Agent10-11-12
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/Incorporator10-11-12
Date