

P13000003394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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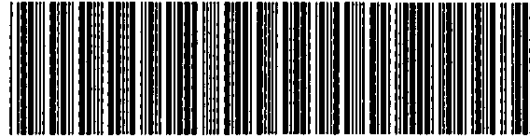
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE FLORIDA

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COVER LETTER

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

SUBJECT: S&L CONSTRUCTION SPECIALISTS, 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 Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: SAULO M. LACERDA
Name (Printed or typed)
9720 OLD PATINA WAY
Address
ORLANDO FL 32832
City, State & Zip
407-300-5080
Daytime Telephone number
slconstructionspec@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: **S&L CONSTRUCTION SPECIALISTS, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
9720 OLD PATINA WAY
ORLANDO FL 32832

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: "PROFESSIONAL CORPORATION"

ARTICLE IV SHARES

The number of shares of stock is: **1000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SAULO M. LACERDA (PRESIDENT)
Address: 9720 OLD PATINA WAY
ORLANDO FL 32832

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: SAULO M. LACERDA
Address: 9720 OLD PATINA WAY
ORLANDO FL 32832

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SAULO M. LACERDA
Address: 9720 OLD PATINA WAY
ORLANDO FL 32832

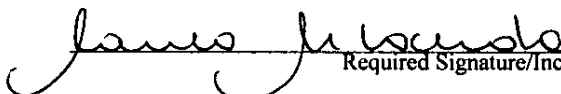
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

02/01/2013

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

02/01/2013

Date

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