0001240

(Req	uestor's Name)			
(Address)				
(Add	lress)			
(City	/State/Zip/Phone	; #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
		:		

Office Use Only

W1300005457



000243877140

01/25/13--01018--012 **87.50

COVER LETTER

Lasner Sport Inc.
(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

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

Enclosed are an o	riginal and one (1) copy of the artic	cles of incorporation and	Jacheck for:	-	
□ \$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM: _	Name	(Printed or typed)			
Pembroke Pines, FL, 33029 City, State & Zip					SECKETARY OF CONTRACTORY
Daytime Telephone number Rlasnernetworks@gmail.com E-mail address: (to be used for future annual report notification)					OF STATE

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



FLORIDA DEPARTMENT OF STATE Division of Corporations



January 28, 2013

RYAN LASNER 18414 NW 9TH CT. PEMBROKE PINES, FL 33029

SUBJECT: LASNER SPORT INC. Ref. Number: W13000005457

We have received your document for LASNER SPORT INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 113A00002111

SECRETARY OF STATE OF STATE OF COMPARATIONS

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

•	In compliance	e with Chapter	607 and/or Chap	oter 621, F.S. ("FIL	E0	
ARTICLE I NAME The name of the corporation	on shall be: Lo	asn <i>ec</i>	Sport	Inc.		SECRETARY MAISION OF C	OE.ST	ate Tions
ARTICLE II PRIN	CIPAL OFFICE rincipal street addr		·		ng address,	13 FEB -6 if different is:	AM 10:	56
18414 NW9+4	ct.		_					
<u>Pembroke</u>	Pines	FC	_					
33029			_					
ARTICLE III PURPO The purpose for which the	OSE corporation is org	anized is:	Obtain	profi	<u>+</u>			
					- "			
ARTICLE IV SHAR The number of shares of side		00		ı				
ARTICLE V INITL	AL OFFICERS A	ND/OR DIR	ECTORS					
Name and Title:_	Ryan Lasn	er-Pres	ident Name	and Title: A	Kinda	, Harpe	<u>-</u> V	P
Address _	18414 NW	9th Ct	Addre			unter ave		
_	<u>fembroke</u>	Pines,	FL	9	pt. 9	D Broken	BRO	NΧ
_	33020	9			VY 1	00475		
Name and Title:			Name	and Title:	-		·	
Address _			Addre	ss:		-		•
_								
_								
Name and Title			Name	and Title:	 -			
Address			Addre	ss:				
			 -					

Name and	1 Title: 1	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of the	ne registered agent is:
The hand and Fi	^ 1	ic registered agent is.
Name:	kyan Lasner	
Address:	18414 NW9th ct. Pembroke Pines, FL 3302	. 3
	Pembrake Pines. FL 3302	9 6 20
	<u></u>	6 mm
ARTICLE VII	INCORPORATOR	
The name and ad	dress of the Incorporator is:	AM IO: 5
Name:	Ryan lasher	
	Ryan lasner 18414 NW 9th ct.	र्दे
Address:		
	Remorates PINES, FL 33020	1
Having been nan this certificate, I d	ned as registered agent to accept service of process for m familiar with and accept the appointment as regis	or the above stated corporation at the place designated in tered agent and agree to act in this capacity
	F.M	1/23/13
	Required Signature/Registered Agent	Date
I submit this doc		ue. I am aware that the false information submitted in a
	Required Signature/Incorporator	1/23/13
	Required Signature/Incorporator	/ Date/