

P13000023906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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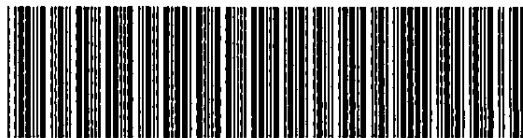
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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13 MAR 13 PM 1:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 MAR 13 2013

COVER LETTER

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

SUBJECT: Limosar, 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
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: Juan Jose Salazar

Name (Printed or typed)

19101 Mystic Pointe Drive - Unit 1601

Address

Aventura, Florida 33180

City, State & Zip

Daytime Telephone number

jjsalcruz@hotmail.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: Limosar, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

19101 Mystic Pointe Drive

Unit 1601

Aventura, Florida 33180

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any lawful business purpose.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Juan Jose Salazar - President

Name and Title: _____

Address 19101 Mystic Pointe Dr.

Address: _____

Unit 1601

Aventura, FL 33180

Name and Title: Lucy Salazar - Vice President

Name and Title: _____

Address 19101 Mystic Pointe Dr.

Address: _____

Unit 1601

Aventura, FL 33180

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FL

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Juan Jose Salazar
Address: 19101 Mystic Pointe Dr. - Unit 1601
Aventura, Florida 33180

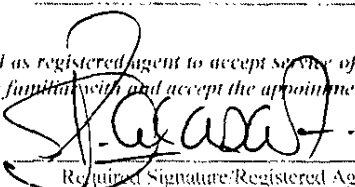
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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

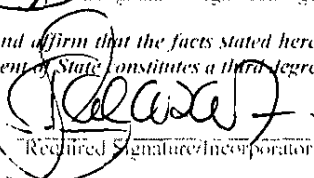
Name: Juan Jose Salazar
Address: 19101 Mystic Pointe Dr. - Unit 1601
Aventura, FLorida 33180

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

March 11, 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

March 11, 2013
Date