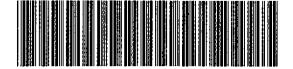
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•				
(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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SECRETARY OF STATE TALLAHASSEE, FLORIO

mD 7/30

COVER LETTER

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

SUBJECT: LASAC, INC.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication \$ 50.00 Articles of Incorporation and Certified Copy \$ 78.75 Total to domesticate and file \$128.75

OPTIONAL:

Certificate of Status

\$ 8.75

R. BRUCE WARREN

Name (printed or typed)

809 SOUTH BROAD STREET

Address

THOMASVILLE, GA 31792

City, State & Zip

229-226-2161

Daytime Telephone Number

bwarren@wbwk.com

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

CERTIFICATE OF DOMESTICATION

The undersigned, R. BRUCE WAR	REN .	CEO/CFO/S	SECRE7	ARY	
(Nan	ne)	(Title)	ALC	ِ <u>سَ</u>
of LASAC, INC.			a foreign	子院 n cerpor	ation, r
(Corporation Na in accordance with s. 607.1801, Florida	•	certify:		SSEE, F	5 三
1. The date on which corporation was	first formed was JAN	UARY 3		, 20星	MII: 53
2. The jurisdiction where the above no came into being was GEORGIA		irst formed, inc	orporated	, or othe	erwise
3. The name of the corporation immed was LASAC, INC.	liately prior to the filin	_	cate of Do	omestica	ntion
4. The name of the corporation, as set s. 607.0202 and 607.0401 with this		• _	o be filed	pursuan	t to
5. The jurisdiction that constituted the administration of the corporation, commediately before the filing of the GEORGIA	or any other equivalent	jurisdiction und			
6. Attached are Florida articles of inco to s. 607.1801.	orporation to complete	the domesticat	ion require	ements _i	oursuant
I am R. BRUCE WARREN, of 809 So	OUTH BROAD STR	EET, THOM	ASVILLE	, GA 3	1792
and am authorized to sign this Certification so this the 23 day of JULY	(Authorized Signatur	***************************************	· .	n and ha	ave done
Certificate of Dor Articles of Incorp Total to domestic	oration and Certified	Copy §	50.00 <u>78.75</u> 128.75		

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME		SECTION TO
THE NAME OF THE CORPORATION SHALL BE:		JUL 25
LASAC, INC.	13331	SSE I
ARTICLE II PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:		SEE, FLORIDA
Principal Address	Mailing Address	
809 SOUTH BROAD STREET	809 SOUTH BROAD	STREET
THOMASVILLE, GA 31792	THOMASVILLE, G	A 31792
ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZ ANY AND LEGAL PURPOSES	ED:	

THE NUMBER OF SHARES OF STOCK IS: 10,000	TASE SECTION OF THE PERSON OF
ARTICLE V INITIAL DIRECTORS AND/O THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:	R OFFICERS Title/Name
Title/Name	
R. BRUCE WARREN, CEO	R. BRUCE WARREN, CFO
809 SOUTH BROAD STREET	809 SOUTH BROAD STREET
THOMASVILLE, GA 31792	THOMASVILLE, GA 31792
Title/Name	Title/Name
R. BRUCE WARRE, SEC.	
809 SOUTH BROAD STREET	
THOMASVILLE, GA 31792	
Title/Name	Title/Name
Title/Name	Title/Name

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

R. BRUCE WARREN
262 HIAMONEE DRIVE
TALLAHASSEE, FL 32312

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

R. BRUCE WARREN

809 SOUTH BROAD STREET

THOMASVILLE, GA 31792



HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

Signature/Registered Agent

Signature/Incorporator

____/ Date/

Date