

9/19/2014 7:30 PM From: 850-1763-1763 (1)

Division of Corporations

Page 1 of 1

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

****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
Laserworld USA, Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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Corporate Filing Menu

Help

SEP 22 PM 12:00

DIVISION OF CORPORATIONS

RECEIVED

14 SEP 22 AM 9:49

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Laserworld USA, 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: Eva K Hackett
Name (Printed or typed)
155 Federal Street, Suite 700
Address
Boston, MA 02116
City, State & Zip
(617) 757-6400
Daytime Telephone number
coconnell@lawson-weitzen.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: Laserworld USA, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

363 7TH AVENUE, 6TH FLOOR

NEW YORK, NY, 10001

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

To engage in all activities authorized or permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Martin Werner, President, Director

Name and Title: Francis Oliveira, Director

Address: 41 Skyline Drive, Suite 1017
Lake Mary, FL 32746

Address: 2328 Falling Acorn Circle
Lake Mary, FL 32746

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

FILED
SEP 22 2014
DIVISION OF CORPORATE FILINGS
PH 12:00

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Francis Oliveira
2328 Falling Acorn Circle
Lake Mary, FL 32746

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Martin Werner
41 Skyline Drive, Suite 1017
Lake Mary, FL 32746

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 of Registered Agent

Date

Signature of Incorporator

Date

SEP 22 PM 12:00

SECRETARY OF STATE
DIVISION OF CORPORATE REGISTRATION