

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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TALLAHASSEE, FLORIDA

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
LUCKY STAR MANAGEMENT SOUTH, INC.

Certificate of Status	0
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Page Count	02
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Corporate Filing Menu

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H/4 00029/082

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

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ARTICLE I NAME

The name of the corporation shall be:

Lucky Star Management South, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2349 NE 28th Court

Lighthouse Point, FL 33064

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation shall have the authority

to engage in any lawful business.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Ostrow, Pres.; Treas.

Name and Title: Cynthia Ostrow, Secretary

Address: 2349 NE 28th Court

Address: 2349 NE 28th Court

Lighthouse Point, FL 33064

Lighthouse Point, FL 33064

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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(cont.)

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: David N. Tolces
Address: 3099 E. Commercial Blvd., #200
Fort Lauderdale, FL 33308

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: David N. Tolces
Address: 3099 E. Commercial Blvd., #200
Fort Lauderdale, FL 33308

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

12/17/14
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

12/17/14
Date

H14000291082