

P15000005740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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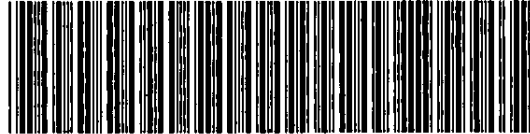
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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15 JAN 20 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1-22-15

## COVER LETTER

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

SUBJECT: **L P PROPERTY MAINTENANCE 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: **GEORGE MORAITIS**

Name (Printed or typed)

**16919 NW 57 AVE**

Address

**MIAMI, FL 33055**

City, State & Zip

**305-620-6362**

Daytime Telephone number

**MORAIT19@BELLSOUTH.NET**

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: L P PROPERTY MAINTENANCE INC

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address

1185 MARSEILLES DRIVE APT 103  
MIAMI BEACH, FL 33141

Mailing address, if different is:

P O BOX 133858  
HIALEAH, FL 33013

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: BUT NOT LIMITED TO LANDSCAPING  
LAWN MAINTENANCE , AND TREE TRIMMING

**ARTICLE IV    SHARES**

The number of shares of stock is: 1000 @ \$1.00 PAR

**ARTICLE V    INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: GUILLERMO RAVELO  
Address: 1185 MARSIELLES DRIVE APT 103  
MIAMI BEACH, FL 33141

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA

(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: GEORGE MORAITIS  
Address: 16919 NW 57 AVE  
MIAMI, FL 33055

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: GUILLERMO RAVELO  
Address: 1185 MARSIELLES DR APT 103  
MIAMI BEACH, FL 33141

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*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

1/13/15  
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

1/13/15  
Date