P15000024844

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
e ulai il				
W15-14964				

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02/12/15--01004--004 **78.50

SECHETARY OF STATE

1/4/

COVER LETTER

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

SUBJECT: // / / / / / / / / / / / / / (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)					
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	d 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 REQUIRE				
FROM: Lloy dD, PRICE JR. Name (Printed or typed) Address Address					
DEERFIELD BEACK FL 3344/ City, State & Zip					
	786-2953193 Daytime Te	7 elephone number	····		
BOUTSTER 7/QAOL. Com. E-mail address: (to be used for future annual report notification)					

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 3, 2015

LLOYD D. PRICE JR. 260 NW 1ST ST, SUITE 15 DEERFIELD BEACH, FL 33441

SUBJECT: LDP INC.

Ref. Number: W15000014964

We have received your document for LDP INC. and your check(s) totaling \$78.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 415A00004285

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

The name of the corr	IAME poration shall be: LDP: ENDEAVO	oes Int.
	PRINCIPAL OFFICE	TAKE 15 MAR 13 AM 11:51
	Principal street address	Mailing address, if different is:
260 NZ	1 1 51	270 NON ATTENDATED
DEERFIRE	D BEACK FL 33441	DEERFIELD BEACK FL. 33441
RTICLE III P	URPOSE	
e purpose for which	ch the corporation is organized is: Ands	SCAPEING AND AUTUSERVICING
cmpany.	PLUS PARTY DIS TENTER	TOLD MENT.
<u> </u>		
he number of shares	HARES s of stock is: / O O O	
ne number of shares	s of stock is. 7000	
RTICLE V I	NITIAL OFFICERS AND/OR DIRECTORS	
	1, 100	Name and Title: LAMONTAFUITON VICE R R
Address		Address: 1200 FINST ST APT M-6
	DEERFIELD BCHFL	KEYWEST F1 33040
	33441	
		
Name and Ti	itle:	Name and Title:
Address		Address:
Name and Ti	itje· 1	Name and Title:
Address		Address:

(conti.)



Name and Title:	Name and Title	e: 15 MAR 13 AM 11:51
Address	Address:	SECRETARY OF STATE TALLAHASSEE, PLORIDA
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) Name:		gent is:
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorporator is: Name: \[\begin{align*} \lambda / a \to PRick \ \mathcal{IR} \] Address: \[\begin{align*} \lambda / a \to PRick \ \mathcal{IR} \] \[\begin{align*} \lambda / a \to PRick \ \mathcal{IR} \] \[\begin{align*} \lambda / a \to PRick \ \mathcal{IR} \] \[\begin{align*} \lambda / a \to PRick \ \mathcal{IR} \] \[\begin{align*} \lambda / a \to PRick \ \mathcal{IR} \] \[\begin{align*} \lambda / a \to PRick \ \mathcal{IR} \] \[\begin{align*} \lambda / a \to PRick \ \mathcal{IR} \] \[\begin{align*} \lambda / a \to PRick \ \mathcal{IR} \] \[\begin{align*} \lambda / a \to PRick \ \mathcal{IR} \] \[\begin{align*} \lambda / a \to PRick \ \mathcal{IR} \] \[\begin{align*} \lambda / a \to PRick \ \mathcal{IR} \] \[\begin{align*} \lambda / a \to PRick \ \mathcal{IR}	 344/	
Having been named as registered agent to accept service of proceed this certificate, I am familiar with and accept the appointment as a Required Signature/Registered Agent I submit this document and affirm that the facts stated herein and	registered agent and	d agree to act in this capacity 2-8-15 Date
document to the Department of State constitutes a third degree fell Required Signature/Incorporator		