## P1500034981

(Requestor's Name)				
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	<del>;</del> #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

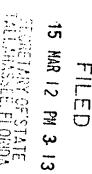
Office Use Only

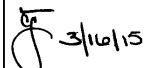
505-



500269332135

02/13/15--01024--017 \*\*78.75





## **COVER LETTER**

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

	eaf Development, Inc.		
SUBJECT:	(PROPOSED CORPOR	RATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are ar	original and one (1) copy of the a	rticles of incorporation and	d a check for:
☐ \$70. Filing F		\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status
FROM		ne (Printed or typed)	
	815 92nd Ave N	,	
	Naples, FL 34108	Address	SECRETA RALL MAR
	City 239-216-0701	y, State & Zip	12 PM
	Daytime arleyperez3@gmail.com	Telephone number	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
		and for future enough conort	notification

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 18, 2015

ARLEY PEREZ, III 815 92ND AVENUE N NAPLES, FL 34108

SUBJECT: LEAF DEVELOPMENT, LLC

Ref. Number: W15000011935

We have received your document for LEAF DEVELOPMENT, LLC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 015A00003446

15 MAR 12 AM 9: 32

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

TICLE I Note that the corporate of the corporate the corporate that th	Leaf Development, Inc.		FILED
ICLE II PI	Principal street address		15 HAR 12 PM 3 Mailing address, if different is: SCONETARY OF STA TALLAHASSEE, FLOR
oles, FL 3410	08		3012,100
YCLE III PU	RPOSE Engineer the corporation is organized is:	ing developm	ent services.
		· * ·	
TICLE IV SI number of shares	LARES 100 of stock is:		
number of shares	of stock is:  IITIAL OFFICERS AND/OR DIRECTOR	 2 <u>S</u>	Benjamin Wai-Man Chan
TICLE V IN	of stock is:  ITTIAL OFFICERS AND/OR DIRECTOR  Arley Perez, III	Name and Title	Benjamin Wai-Man Chan
number of shares	of stock is:  ITTIAL OFFICERS AND/OR DIRECTOR  Arley Perez, III tle:		·
Name and Ti	TITIAL OFFICERS AND/OR DIRECTOR Arley Perez, III tle: 200 Quail Forest Blvd. Unit 106 Naples, FL 34105	_ Name and Title _ Address:	815 92nd Ave N Naples, FL 34108
Name and Tit	TTIAL OFFICERS AND/OR DIRECTOR Arley Perez, III tle: 200 Quail Forest Blvd. Unit 106 Naples, FL 34105	Name and Title Address:  Name and Title	815 92nd Ave N Naples, FL 34108
Name and Ti	TITIAL OFFICERS AND/OR DIRECTOR Arley Perez, III tle: 200 Quail Forest Blvd. Unit 106 Naples, FL 34105	Name and Title Address:  Name and Title Address:	815 92nd Ave N Naples, FL 34108
Name and Tit	TITIAL OFFICERS AND/OR DIRECTOR Arley Perez, III tle: 200 Quail Forest Blvd. Unit 106 Naples, FL 34105	Name and Title Address:  Name and Title Address:	815 92nd Ave N Naples, FL 34108
Name and Tit Address  Address	ITIAL OFFICERS AND/OR DIRECTOR Arley Perez, III tle: 200 Quail Forest Blvd. Unit 106 Naples, FL 34105	Name and Title Address:  Name and Title Address:	815 92nd Ave N Naples, FL 34108

Name and	1 Title:	Name and Title:
Address		Address:
ARTICLE VI The name and Fle Name: Address:	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of Arley Perez, III  200 Quail Forest Blvd. Unit 106 Naples, FL 34105	of the registered agent is:
ARTICLE VII	INCORPORATOR	
Name: 200 C	dress of the Incorporator is: Arley Perez, III  200 Quail Forest Blvd. Unit 106	- -
	Naples, FL 34105	_
	ned as registered agent to accept service of proces im familiar with and accept the appointment as re	s for the above stated corporation at the place designated i gistered agent and agree to act in this capacity
Rie	$\sim \pi$	10-March -2015
	Required Signature/Registered Agent	Date
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felou	true. I am aware that the false information submitted in sy as provided for in s.817.155, F.S.
Réc	Required Signature/Incorporator	10-March-2015 Date
		FILE, 15 MAR 12 P SECRETARY OF