

P/5000 29598

(Requestor's Name)

(Address)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 1 2015  
S. GILBERT

## COVER LETTER

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

SUBJECT: Las Rose, 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: Or Bonder

Name (Printed or typed)

2021 N Lemans Blvd #7310

Address

Tampa FL 33607

City, State & Zip

702-460-5565

Daytime Telephone number

plonteron@gmail.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: Las Rose, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2021 N Lemans Blvd #7310

Tampa FL 33607

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**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Business consulting

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: Or Bonder - President

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

Address 2021 N Lemans Blvd  
#7310

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

Tampa, FL 33607

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

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

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

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

(conti.)

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: Or Bonder  
Address: 2021 N Lemans Blvd #7310  
Tampa FL 33607

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Doreen Porat Hamaoui  
Address: 12006 98th Ave NE Ste105  
Kirkland, WA 98034

*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*

O. Bonder

3/23/2015

\_\_\_\_\_  
Required Signature/Registered Agent

\_\_\_\_\_  
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.*

[Signature]  
Required Signature/Incorporator

3/24/15  
Date