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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**To:**

Division of Corporations  
Fax Number : (850)617-6381

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**Email Address:** \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
LFC SERVICES ORGANIZATION INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

15 MAY -7 PM 4:30

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**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME:** The name of the corporation is:LFC SERVICES Organization Inc**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

3160 NW 96 STMIAMI FL 33147**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**LESTHER FUENTES CRUZ (P)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

LESTHER FUENTES CRUZ3160 NW 96 STMIAMI FL 33147**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:LESTHER FUENTES CRUZ3160 NW 96 STMIAMI FL 33147FILED  
TALLAHASSEE, FLORIDA

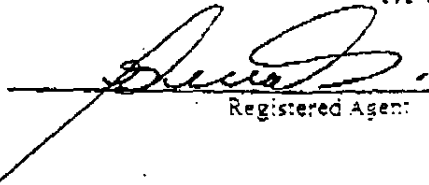
15 MAY -7 AM 9:29

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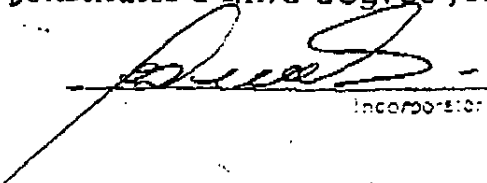
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**Required Signatures:**

**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**

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

  
\_\_\_\_\_  
Incorporator Date

15 MAY -7 AM 9:29  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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