

05/21/2033 05:52

PF 56 P.001/003

150005767

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000168897 3)))



H150001688973ABCC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
LRC1 CORP.**

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

15 JUL 10 AM 9:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

05/21/2033 05:52

04/30/2007 01:31

7863180430

SUNSHINE ROOFING

#5156 P.002/003

PAGE 02/03

H15000168897

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

LRC1 Corp.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

20230 NW 7th St. Pembroke Pines FL, 33029

ARTICLE III SHARES: The number of shares of stock is:

100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Lourdes Rodriguez (P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Lourdes Rodriguez

20230 NW 7th St. Pembroke Pines FL, 33029

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Lourdes Rodriguez

20230 NW 7th St. Pembroke Pines FL, 33029

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JUL 10 AM 9:17

FILED

H15000168897

05/21/2033 05:52

04/30/2007 01:31

7863180438

SUNSHINE ROOFING

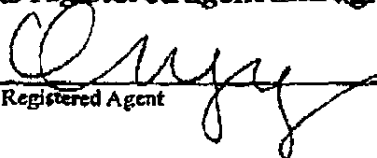
#5156 P.003/003

PAGE 03/03

H15000168897

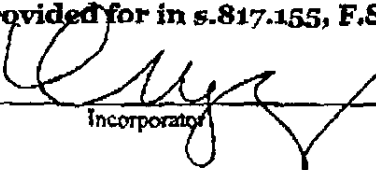
Required Signatures:

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 7-10-15
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.



Incorporator 7-10-15
Date

FILED
15 JUL 10 AM 9:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H15000168897