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16 MAR 14 PM 1:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

1/H

COVER LETTER

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

SUBJECT: LANDROD CORP
(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: RAFAEL RODRIGUEZ
Name (Printed or typed)
4400 NW 79TH AVENUE APT 503
Address
DORAL, FL. 33166
City, State & Zip
786-458-3279
Daytime Telephone number
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)

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ARTICLE I NAME

The name of the corporation shall be: LANROD CORP

16 MAR 14 PM 1:55

ARTICLE II PRINCIPAL OFFICE

Principal street address
4400 NW 79TH AVE APT 503

DORAL, FL. 33166

SECRETARY OF STATE
TALLAHASSEE FLORIDA
Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RAFAEL RODRIGUEZ-P

Address: 4400 NW 79TH AVE APT 503

DORAL, FL. 33166

Name and Title: _____

Address: _____

Name and Title: ROSANA LANDAZURI-VP

Address: 4400 NW 79TH AVE APT 503

DORAL, FL. 33166

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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Name and Title: _____ Name and Title: 16 MAR 14 PM 1:55
Address: _____ Address: SECRETARY OF STATE

TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: RAFAEL RODRIGUEZ
Address: 4400 NW 79TH AVE APT 503
DORAL, FL. 33166

ARTICLE VII INCORPORATOR

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

Name: RAFEL RODRIGUEZ
Address: 4400 NW 79TH AVENUE APT 503
DORAL, FL. 33166

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

X [Signature] Required Signature/Registered Agent 03/05/16 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.

X [Signature] Required Signature/Incorporator 03/05/16 Date