

04/19/2016 15:47

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LAZARUS

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION

L'FAM EMPIRE COMPANY

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

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H1000097376

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: LFAM EMPIRE COMPANY

ARTICLE II PRINCIPAL OFFICE

Principal street address
18161 SW 142 PL MIAMI FL 33177

Mailing address, if different is:

18161 SW 142 PL
Miami FL 33177

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FASHION LINE OF CLOTHES AND FASHION DESIGN

ARTICLE IV SHARES

The number of shares of stock is: 100

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FLORIDA
CORPORATION
COMMISSIONER
APR 20 1992
1000097376

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: PRESIDENT

Name and Title: _____

Address: _____

ADYEREN HERNANDEZ

Address: _____

18161 SW 142 PL MIAMI FL 33177Name and Title: VICE PRESIDENT

Name and Title: _____

Address: _____

ARIS AHMED CORDOVA

Address: _____

18161 SW 142 PL MIAMI FL 33177

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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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: ADYEREN HERNANDEZ

18161 SW 142 PL MIAMI FL 33177

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Adyeren Hernandez
Address: 18161 SW 142 PL
Miami FL 33177

16 APR 19 PH 12:52
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

~~Required Signature/Registered Agent~~

04/14/2016

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.

Required Signature *[Signature]*

~~Date~~

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