

P 1600054569

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16 JUN 22 PM 3:47
U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D.C. 20535

6/29/16

COVER LETTER

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

SUBJECT: LMS Governmental Relations, 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: Lauren Morris Schulman

Name (Printed or typed)

21150 Point Place, #1503

Address

Aventura, FL 33180

City, State & Zip

3058039640

Daytime Telephone number

Vote2Win@aol.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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EFFECTIVE DATE 06/27/16

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: LMS Governmental Relations, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

21150 Point Place, #1503

21150 Point Place, #1503

Aventura, FL 33180

Aventura, FL 33180

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide Political Consulting Services to candidates,
incumbent elected officials, businesses & organizations by building relationships with influential community
& civic leaders who may have an interest in financially and/or publicly supporting a particular candidate or
issue. Collaboration with other Political Consultants may occur when deemed appropriate.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lauren Morris Schulman, CEO

Name and Title: _____

Address 21150 Point Place, #1503

Address: _____

Aventura, FL 33180

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: Clifford Schulman, Esq.
Address: 21150 Point Place, #1503
Aventura, FL 33180

ARTICLE VII INCORPORATOR

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

Name: Lauren Morris Schulman
Address: 21150 Point Place, #1503
Aventura, FL 33180

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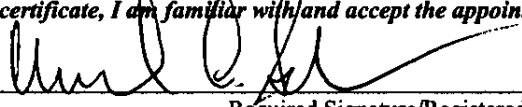
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: June 27, 2016 (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

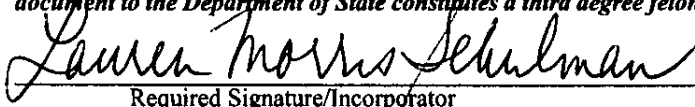


Required Signature/Registered Agent

June 17, 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/Incorporator

June 17, 2016

Date