

P17000005311

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2017 JAN 17 PM 2:49
CLERK OF STATE
TALLAHASSEE, FLORIDA

V HERRING
JAN 20 2017

COVER LETTER

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

SUBJECT: L C A Inc. an S Corporation

(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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Lucas L Ardila

Name (Printed or typed)

10818 SW 72 ST # 151

Address

Miami, FL 33173

City, State & Zip

786 759 4926

Daytime Telephone number

Claudia_Cuadra@hotmail.com

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: L C A Inc.

2017 JAN 18 PM 2:51

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address

10818 SW 72 ST. # 151

Miami, Fl 33173

CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To trade miscellaneous merchandise including but not limited to handcraft items, nationwide and overseas

ARTICLE IV SHARES

The number of shares of stock is: 1000 (One Thousand)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lucas L. Ardila- P

Name and Title: Claudia M. Cuadra -VP

Address 10818 SW 72 ST. # 151

Address: 10818 SW 72 ST # 151

Miami, Fl 33173

Miami, Fl 33173

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

P. V

FILED

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

2017 JAN 18 PM 2:51

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: Claudia M Cuadra
Address: 10818 SW 72 ST #151
Miami FL 33173

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lucas L. Ardila
Address: 10818 SW 72 ST #151
Miami FL 33173

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 days prior or 90 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

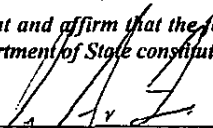


Required Signature/Registered Agent

01.16.2017

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

01/16/17

Date