

P 17000010127

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

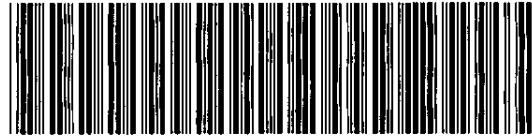
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/01/17--01004--008 **78.75

SEP 11 2016
17 FEB -1 AM 10:49

2017 FEB -1 PM 1:41
FEB 1 2017
FEB 1 2017

C. GOLDEN

FEB -1 2017



1000 Ponce de Leon Blvd. Suite: 105
Coral Gables, FL 33134
Phone: 305-444-4994
Email: filing@ecfsfiling.com

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. LA. CE. HM, CORP

(CORPORATE NAME)

(DOCUMENT #)

2.

(CORPORATE NAME)

(DOCUMENT #)

3.

(CORPORATE NAME)

(DOCUMENT #)

☐ Walk-In

☒ Pick up time: _____

☒ Certified Copy

☐ Certificate Of Status

New Filings	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Other:

Amendments	
<input type="checkbox"/>	Amendments
<input type="checkbox"/>	Resignation
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Other:

Other Filings	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Apostille:
<input type="checkbox"/>	Other:

Examiners Initials	
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

2017 FEB -1 PM 1:41

ARTICLE I NAME

The name of the corporation shall be: LA.CE.MM. CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address
2385 NE 173 ST APT: A203

Mailing address, if different is:

N.MIAMI BEACH, FL 33160

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lourimel Alexandra Mejia Mora (P)

Name and Title: _____

Address 2385 NE 173 ST APT: A203

Address: _____

N.MIAMI BEACH, FL 33160

Name and Title: Carlos Enrique Mejia Mora (V/P)

Name and Title: _____

Address 2385 NE 173 ST APT: A203

Address: _____

N.MIAMI BEACH, FL 33160

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: Lourimel Alexandra Mejia Mora

Address: 2385 NE 173 ST APT: A203

N.MIAMI BEACH, FL 33160

ARTICLE VII INCORPORATOR

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

Name: Lourimel Alexandra Mejia Mora

Address: 2385 NE 173 ST APT: A203

N.MIAMI BEACH, FL 33160

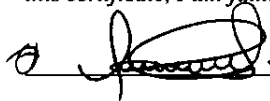
ARTICLE VIII EFFECTIVE DATE:

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

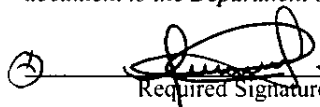


Required Signature/Registered Agent

01/31/2017

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

01/31/2017

Date

FILED
2017 FEB -1 PM 1:41
TALLAHASSEE FLORIDA