Division of Corporations Electronic Filing Cover Sheet

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To:					
	Division of Compositions				

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION LEAL'S LEGACY, INC

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

Electronic Filing Menu

Corporate Filing Menu

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APR 12 2017

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ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:	;
LEAL'S LEGACY, INC	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
· · · · · · · · · · · · · · · · · · ·	
2025 3W 145 AVG WANI, FL- 33/75	
RTICLE III SHARES: The number of shares of stock is:	100
ARTICLE IV INITIAL DIRECTORS AND/OR OFFIC	ERS:
ALEKSEJS LEAL (P)	
ARTICLE V INITIAL REGISTERED AGENT AND STREET	ADDRESS:

	stered agent is
The name and Florida street address (PO Box not acceptable) of the regi	stered agent is
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The name and Florida street address (PO Box not acceptable) of the region of the regio	stered agent is

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Required Signatures:

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

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.