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Florida Department of State
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Division of Corporations
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From:

Account Name : SHREEHAN & CELAYA, P.A.
Account Number : I20080000087
Phone : (863) 465-1551
Fax Number : (863) 465-5251

****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

Email Address: lionelbarajas@gmail.com

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION

L.S. BARAJAS, INC.

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Corporate Filing Menu

Help

ARTICLES OF INCORPORATION
OF
L.S. BARAJAS, INC.

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act hereby adopts the following Articles of Incorporation:

ARTICLE ONE

The name of the corporation is L.S. BARAJAS, INC.

ARTICLE TWO

The term of existence of the corporation is perpetual.

ARTICLE THREE

The corporation may transact any and all lawful business for which corporations may be incorporated under the Florida General Corporation Act.

ARTICLE FOUR

The aggregate number of shares which the corporation has authority to issue is ONE HUNDRED (100), all of which shall be common shares with a par value of \$1.00 per share.

ARTICLE FIVE

The street address of the initial registered office of the corporation is 117 Lake June Drive, Lake Placid, Florida 33852, and the initial registered agent at such address is **LIONEL S. BARAJAS**. The mailing address for the corporation is 117 Lake June Drive, Lake Placid, Florida 33852. The street address of the principal office of the corporation is 117 Lake June Drive, Lake Placid, Florida 33852.

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ARTICLE SIX

The board of directors of the corporation shall consist of not more than five (5) members.

The name and address of the initial board of directors are:

NAME:

ADDRESS:

LIONEL S. BARAJAS

117 Lake June Drive
Lake Placid, Florida 33852

ARTICLE SEVEN

The name and address of the sole incorporator is:

NAME:

ADDRESS:

LIONEL S. BARAJAS

117 Lake June Drive
Lake Placid, Florida 33852

IN WITNESS WHEREOF, I have subscribed my name this 22 day of May, 2017.



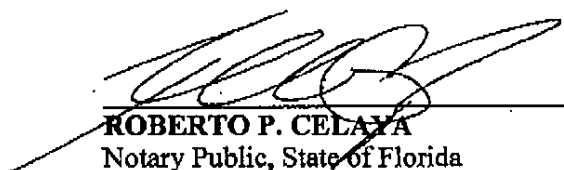
LIONEL S. BARAJAS
Incorporator

STATE OF FLORIDA
COUNTY OF HIGHLANDS

The foregoing instrument was acknowledged before me this 22 day of May, 2017,
by **LIONEL S. BARAJAS**, who is ☒ personally known to me, or who has ☐ produced his
_____ as identification and who did not take an oath.



ROBERTO PABLO CELAYA
MY COMMISSION # FF 899430
EXPIRES: October 6, 2020
Booked Time Budget Notary Services



ROBERTO P. CELAYA
Notary Public, State of Florida
(Affix Seal)

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ACCEPTANCE

I agree as registered agent to accept service of process, to keep the registered office open during prescribed hours, and to post my name in some conspicuous place in the office as required by law.



LIONEL S. BARAJAS
Registered Agent

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