

P170000 75590

Division of Corporations

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : CAPITOL SERVICES, INC.  
Account Number : I20160000017  
Phone : (800) 345-4647  
Fax Number : (800) 432-3622

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

Email Address: \_\_\_\_\_

**\*\*\*PLEASE GIVE ORIGINAL SUBMISSION DATE 8/30/2017\*\*\***

FLORIDA PROFIT/NON PROFIT CORPORATION  
LAYZE ENTERPRISES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

N. SAMS

SEP 19 2017

**PLEASE GIVE ORIGINAL SUBMISSION DATE 8/30/2017\*\*\***

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Corporate Filing Menu

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17 SEP 18 PM 4:11  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 6, 2017

CAPITOL SERVICES

SUBJECT: LAYZE ENTERPRISES, INC.  
REF: W17000072629

\*\*\*PLEASE GIVE ORIGINAL  
SUBMISSION DATE  
OF 8/30/17\*\*\*

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Tyrone Scott  
Regulatory Specialist II  
New Filings Section

FAX Aud. #: H17000234566  
Letter Number: 917A00018348

**COVER LETTER**

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

**SUBJECT:** Layze Enterprises, 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      ☐ \$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:** Martin Weisberg

Name (Printed or typed)

18 Rockledge Road

Address

Rye, New York 10580

City, State & Zip

(914) 319-8053

Daytime Telephone number

meweisberg@meweisbergconsulting.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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17 SEP 18 PM 4:11

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

RECEIVED  
TALLAHASSEE, FLORIDA**ARTICLE I NAME**The name of the corporation shall be: Layze Enterprises, Inc.**ARTICLE II PRINCIPAL OFFICE**Principal street address  
6355 NW 36th Street

Mailing address, if different is:

Suite 310Virginia Gardens, FLA 33167**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Any purpose permitted by Florida law.**ARTICLE IV SHARES**The number of shares of stock is: 1,000 shares of common stock**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Ricardo Aboud Director Name and Title: \_\_\_\_\_Address: 6355 NW 36th Street Address: \_\_\_\_\_Suite 310 \_\_\_\_\_Virginia Gardens, FLA 33167 \_\_\_\_\_Name and Title: Orlando Gonzalez President Name and Title: \_\_\_\_\_Address: 2782 NW 79th Street Address: \_\_\_\_\_Miami, FLA 33122 \_\_\_\_\_

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: Ricardo Abood  
Address: 6355 NW 36th Street  
Suite 310, Virginia Gardens FLA 33167

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: Martin Weisberg  
Address: 18 Rockledge Road  
Rye, New York 10580

**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*

Ricardo Abood  
Required Signature/Registered Agent

9/18/2017  
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.*

Martin Weisberg  
Required Signature/Incorporator

9/18/2017  
Date