

P20000014223

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

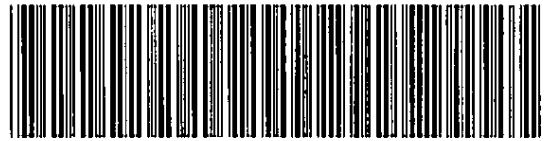
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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2020 FEB 17 PM 4:38
SEBASTIAN COUNTY
TALLAHASSEE, FLORIDA

18 2020

Drumblay

COVER LETTER

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

SUBJECT: L & Y MANAGEMENT Group, 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: YOHANA E. LIMA
Name (Printed or typed)
10845 SW 112TH AVENUE APT 308
Address
MIAMI, FL 33176
City, State & Zip
(305) 586 4792
Daytime Telephone number
yohapochy@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)

ARTICLE I NAME

The name of the corporation shall be: L & Y MANAGEMENT GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

10845 SW 112TH AVENUE APT 308

MIAMI FL 33176

Mailing address, if different is:

10845 SW 112TH AVENUE APT 308

MIAMI FL 33176

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LEGAL BUSINESS / ACTIVITY PERMITTED IN THE
STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is: 100 (One hundred)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: YOHANA E. LIMA - President

Address 10845 SW 112th Avenue Apt 308

Miami FL 33176

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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2021 FEB 17 PM 4:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: YOHANA E. LIMA -

Address: 10845 SW 112th Avenue Apt 308

Miami FL 33176

ARTICLE VII INCORPORATOR

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

Name: YOHANA E. LIMA

Address: 10845 SW 112TH AVENUE APT 308

Miami FL 33176

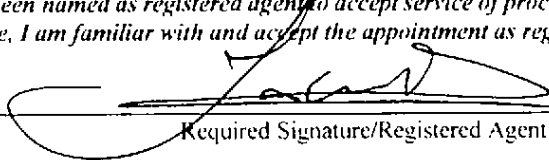
ARTICLE VIII EFFECTIVE DATE:

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.

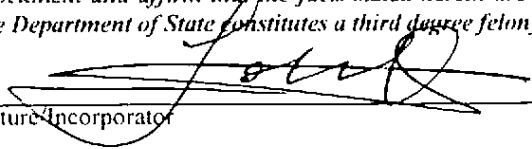
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

02/01/2020
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

02/01/2020
Date