

3/30/2021

Division of Corporations

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 : ARIMIR SERVICES GROUP LLC
Account Number : I20200000022
Phone : (305)420-5722
Fax Number : (305)643-5225

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

Email Address: LACHEDUNI11@GMAIL.COM

FLORIDA PROFIT/NON PROFIT CORPORATION
LACHE CABINETS AND GRANITE INC

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

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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: LACHE CABINETS AND GRANITE INC

ARTICLE II PRINCIPAL OFFICE

Principal Address
6905 NW 50TH ST
MIAMI, FL 33166

Mailing address, if different is:

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: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Daniesqui Lache - President

Name and Title: _____

Address

6905 NW 50TH ST MIAMI
FL 33166

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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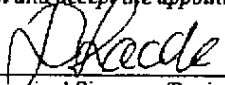
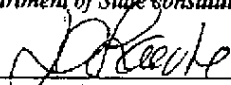
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Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: Danjesqui LacheAddress: 6905 NW 50TH STMIAMI, FL 33166**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: Danjesqui LacheAddress: 6905 NW 50TH STMIAMI, FL 33166**ARTICLE VIII EFFECTIVE DATE:**Effective date, if other than the date of filing: 3/30/2021 (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 Agent3/30/2021
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/Incorporator3/30/2021
Date

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