Electronic Filing Cover Sheet

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To:

Division of Corporations

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

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

Email	Address:			· · · · · · · · · · · · · · · · · · ·	
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FLORIDA PROFIT/NON PROFIT CORPORATION L.S.A. PRO-INSTALLATION INC

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

Electronic Filing Menu

Corporate Filing Menu

Help



Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise that the owners of

L.S.A. Pro-Installation INC of Document # P200000 88837

are the same owners of the attached articles of incorporation. We have dissolved the company and have no intention of reopening it.

Thank you for your help in this matter.

Thanks,

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

NAME: The name of the corporation is: ARTICLE II PRINCIPAL OFFICE: The principal street address and mailing address is: ARTICLE III SHARES: The number of shares of stock is: ∞ <u>INITIAL REGISTERED AGENT AND STREET ADDRESS:</u> The name and Florida street address (PO Box not acceptable) of the registered agent is: INCORPORATOR: The name and address of the Incorporator is:

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

Registered Agent 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.

Incorporator Date

2023 JUL -8 PH 2: 03