Division of Corporations

P22000080315

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000360622 3)))

H22000360622 3ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : GERALD WEINBERG, P.C.
Account Number : I20030000043
Phone : (800)342-9856
Fax Number : (800)354-3381

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
LIL CONTRACTING SERVICES INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	$70.00

2022 OCT 20 PM 4:46

Electronic Filing Menu Corporate Filing Menu Help

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: LIL CONTRACTING SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

643 JAMESTOWN BOULEVARD
APARTMENT 2132
ALTAMONTE SPRINGS, FL 32714

Mailing address, if different is:

643 JAMESTOWN BOULEVARD
APARTMENT 2132
ALTAMONTE SPRINGS, FL 32714

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: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LEONARD SUDLER, P
Address: 643 JAMESTOWN BOULEVARD
APARTMENT 2132
ALTAMONTE SPRINGS, FL 32714

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

(H22000360622 3)

(H22000360622 3)

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: LEONARD SUDLER

Address: 643 JAMESTOWN BLVD., APT. 2132

ALTAMONTE SPRINGS, FL 32714

ARTICLE VII INCORPORATOR

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

Name: LAWRENCE A. KIRSCH

Address: 41 STATE STREET, SUITE 700

ALBANY, NEW YORK 12207

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

/S/ Leonard Sudler — Required Signature/Registered Agent

10/20/2022 — 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.

Lawrence A Kirsch — Required Signature/Incorporator

10/20/2022 — Date

(H22000360622 3)