Division of Corporations Electronic Filing Cover Sheet

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(((H230004413013)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : RASI

Account Number : I20220000023 : (800)221-2972 Fax Number : (917)243-5843

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 LBW Lighting Inc.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

Help

To: , ,

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

LE II PRINCIP	. a . a. et ever at al		
Pr	AL OFFICE incipal street address	Mailing address	, if different is:
Dorset E			
a Raton, FL 3343	4		
CLE III PURPOS urpose for which the	E corporation is organized is: sales of	f lighting products	
			
CLE IV SILARE	<u></u>		
number of shares of s	tock is: 100		
meter V INCELA			
CICLE V BULLIA	L OFFICERS AND/OR DIRECTORS		
		Name and Title:	
	Mitchell Y. Cohen, President		
Name and Title	Mitchell Y. Cohen, President	Address:	
Name and Title	Mitchell Y, Cohen, President 178 Dorset E	Address:	
Name and Title Address	Mitchell Y, Cohen, President 178 Dorset E Boca Raton, FL 33434	Address:	
Name and Title Address	Mitchell Y, Cohen, President 178 Dorset E	Address: Name and Title:	
Name and Title Address Name and Title	Mitchell Y, Cohen, President 178 Dorset E Boca Raton, FL 33434	Name and Title:	
Name and Title Address Name and Title	: Mitchell Y, Cohen, President 178 Dorset E Boca Raton, FL 33434	Name and Title:	
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Name and Title Address Name and Title Address	: Mitchell Y, Cohen, President 178 Dorset E Boca Raton, FL 33434	Name and Title: Name and Title: Address: Name and Title: Address:	

Name and Ti	tle: Name and Title:	Name and Title:			
Address	Address:				
	araman Ph. (CPAIG				
The name and Flori	GISTERED AGENT da street address (P.O. Box NOT acceptable) of the registered agent is:				
Name: _	Registered Agent Solutions, Inc.				
Address:	2894 Remington Green Ln Ste. A				
	Tallahassee, FL 32308				
ARTICLE VII <u>IN</u>	CORPORATOR				
	ess of the Incorporator is:				
	Mitchall V. Cohen				
Name:	479 Demot E				
Address:	Boca Raton, FL 33434				
	Book Helding 1 C do 10.				
Effective date if of	ther than the date of filing: (OPTIONAL) te is listed, the date must be specific and cannot be more than five days prior	or 90 days after t	ihe		
Note: If the date i	nserted in this block does not meet the applicable statutory filing requirements, th ective date on the Department of State's records.	is date will not be	listed as		
Having been name certificate, I am fa	ed as registered agent to accept service of process for the above stated corporation a miliar with and accept the appointment as registered agent and agree to act in this	t the place designa capacity	ted in this		
	7 ⁴	12/28/2023			
	Required Signature/Registered Agent	Date			
I submit this docu	iment and affirm that the facts stated herein are true. I am aware that the false	Information subn	sitted in a		
document to star D	epartment of State constitutes a third degree felony as provided for in s.817.155, F	<u>'</u> _	202 9 L		
Required Signatur	re/Incorporator Date	12/28/2023			
Kednika aikima	o incorporator		100		
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