

**P24000016396**

(Requestor's Name)

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(City/State/Zip/Phone #)

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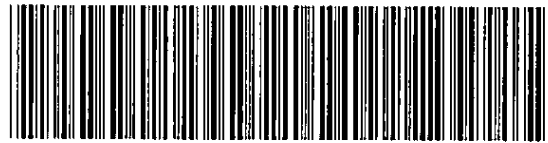
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**W24000019935**

T.J.H

2/6/24

T.S.H

3/6/24

## COVER LETTER

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

SUBJECT: LZG HOLDINGS 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: MATHIEU LESGOURGUES  
Name (Printed or typed)

200 LESLIE DR. - APT 729  
Address

HALLANDALE BEACH, FL 33009  
City, State & Zip

H(310) 904-8298  
Daytime Telephone number

l2g-holdings@pm.mc  
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: LZG HOLDINGS INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

200 LESLIE DR  
APT 729  
HALLANDALE BEACH, FL 33009

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to engage in the holding,  
management and investment of assets, including but not  
limited to, ownership of subsidiaries and diverse business  
interests, in accordance with applicable laws and  
regulations.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	<u>MATHIEU LESGOURGUES / <del>CEO</del> <sup>CEO</sup></u>	Name and Title:	<u>SARAH ANN LESGOURGUES / <del>CEO</del> <sup>CEO</sup></u>
Address	<u>200 LESLIE DR</u> <u>APT 729</u> <u>HALLANDALE BEACH, FL 33009</u>	Address:	<u>200 LESLIE DR.</u> <u>APT 729</u> <u>HALLANDALE BEACH, FL 33009</u>

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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: MATHIEU LESGOURGUES  
Address: 200 LESLIE DR - APT 729  
HALLANDALE BEACH, FL 33009

**ARTICLE VII INCORPORATOR**

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

Name: MATHIEU LESGOURGUES  
Address: 200 LESLIE DR - APT 729  
HALLANDALE BEACH, FL 33009

**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 MATHIEU LESGOURGUES 11/1/2024  
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.*

\_\_\_\_\_  
11/1/2024