TAL CONNECTION, INC. 🔑

417 E. Virginia St., Suite 1, Tallahrssee, FL 32301, (904)224-8870 Malling Address: Post Office Box 10349, Tallahassee, FL 32302 TOLL FREE No. 1-600-342-8062 FAX (904) 222-1222

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Service: To C	One Day Service Two Day Service
To us via	Return vla
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WALK-IN Will Pick Up 11:0

Please remit invoice number with payment TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum.

THANK YOU from Your Capital Connection

DISBURSED

C.C. FEE.

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 12, 1995

CAPITAL CONNECTION P.O. BOX 10349 TALLAHASSEE, FL 32302

SUBJECT: SALINAS FINANCIAL SERVICES, INC.

Ref. Number: W95000007774

We have received your document for SALINAS FINANCIAL SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must include original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6928.

Agnes Bundick Corporate Specialist

Letter Number: 695A00016552

Corrected

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LORIDA DEPARTMENT OF STAT! Sandra B. Mortham. Secretary of State

April 19, 1995

CAPITAL CONNECTION P.O. BOX 10349 TALLAHASSEE, FL 32302

SUBJECT: L & S FINANCIAL CONSULTANTS

Ref. Number: W95000007774

We have received your document for L & S FINANCIAL CONSULTANTS, However, the document has not been filed and is being returned for the following:

ONLY ONE REGISTERED AGENT IS NEEDED.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6928.

Agnes Bundick Corporate Specialist

Letter Number: 295A00018376

CONFECTE

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 8327 Tallahassee, FL 32314

SUBJECT: L & S	Financi posed corporate nar	al Consume - must include suffix	Itants, Inc	
Enclosed is an original ar for: \$70.00 [Filing Fee	nd one (1) copy o \$78.75 Filing Fee & Certificate	of the articles of inc \$122.50 Filing Fee & Certified Copy	corporation and a check \$131.25 Filing Fee, Certified Copy & Certificate	
FROM:	Laura Name (pri	Salinas inted or typed)	é Suzanne	London
		ouglas Ave		
	Altamont Ciry.	e Springs, State & Zip	F1. 32714	
	(407) 8 Daytime Te	62 - 3706	·	

NOTE: Please provide the original and one copy of the articles.

FILED

ARTICLES OF INCORPORATIONS APR 20 AM 10: 23

SALAHASSES FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: L & 5 Financial Consultants,

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

801 N. Douglas Ave. Altamonte Springs, Fl. 32751

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Laura Salinas /

801 N. Douglas Ave. Alternante Springs, F1.

32714

. ARTICLE V INCORPORATORIS

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Laura Salinas / Suzanne London Suzanne London 801 N. Douglas Ave Altamonte Springs, F1. 32714

The undersigned income	rporator(s) has(have) ex	ecuted these Articles	of Incorporation this
	day of April	, 19 <u>9</u> s	. - •
	Louis Sansti	linas	
	Jugne Signali	n lm ure	

Articles of Incorporation Filing Fee - \$35

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: L.E.S. Financial Cons	ultants,
--	----------

2. The name and address of the registered agent and office is:

Laura Salinas	- 55 mil
(Name)	20
801 N. Douglas Ave	M-1
(P.O. Box not acceptable)	70. 5
Altamonte Springs, Fl.	<u> 35.718</u> /
(City/State/Zip)	•

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Laura Salinas April 14, 1995
(Signature) (Date)