

TRANSMITTAL LETTER

P96000008092

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

SUBJECT: LCC, INC. OF SOUTH FLORIDA
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of Incorporation and a check
for :

☐ \$70.00

☐ \$78.75

☒ \$122.50

☐ \$131.25

FROM: LISA CATRI
Name (printed or typed)

500001694805
-01/22/96--01064--007
*****122.50 *****122.50

3150 PALM AIRE DR. NORTH SUITE 301
Address

POMPANO BEACH, FL 33069
City, State & Zip

954-972-7150
Daytime Telephone number

Dmc
1-25-96

FILED
96 JAN 22 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION **FILED**

96 JAN 22 PM 3:55

OF

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LCC, INC. OF SOUTH 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: LCC, INC. OF SOUTH FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

3150 PALM AIRE DR. NORTH
SUITE 301
POMPANO BEACH, FL 33069

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LISA CATRI
3150 PALM AIRE DR. NORTH
SUITE 301
POMPANO BEACH, FL 33069

ARTICLE V. INCORPORATOR(S)

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

LISA CATRI
3150 PALM ALRE DR. NORTH
SUITE 301
POMPANO BEACH, FL 33069

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

15TH day of JANUARY, 1996.

Lisa Catri
Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

**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: LCC, INC. OF SOUTH FLORIDA

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TALLAHASSEE, FLORIDA

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

LISA CATRI

(Name)


3150 PALM AIRE DR. NORTH SUITE 301

(P.O. Box not acceptable)

POMPANO BEACH, FL 33069

(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.


(Signature)