# P96000054032 TRANSMITTAL LETTER

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

SUBJECT:	L.A. C	3. FNC	) 	
	(Proposed corporate r	name - must include su		001857766
			-06/11/ #####	/9601070011
Enclosed is an origin for:	al and one (1) co	py of the articles o	of incorporation ar	id a check
#70.00 Filing Fee	Filing Fee & Certificate	#122.50 Filing Fee & Cerdiled Copy	### 6131.25  Filing Fee, Certified Copy & Certificate	
		Additional Cop		
FROM		ille Ba	Itelen	٥
	5260	3nd Rd Address	· ·	
	Lake	WorTk -	F/a 334	147
	HO7 Daytime	9681713 Telephone number	<u>, , , , , , , , , , , , , , , , , , , </u>	96 JUH 24 SECRETAR ALLAHASS
		Confli	it 94-93569	rate mare

NOTE: Please provide the original and one copy of the articles. 789, 502, 671 w96-12596



June 13, 1996

LUCILLE BATTELENE 5260 3RD RD LAKE WORTH, FL 33467

SUBJECT: L.A.B. INC.

Ref. Number: W96000012596

We have received your document for L.A.B. INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name DOES NOT constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

You must list at least one incorporator with a complete business street address.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 487-6919.

Beth Register Corporate Specialist Supervisor

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Letter Number: 296A00029455



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. A. B. Metal Works Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

5260 3rd Rd Sake Worth Fla

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

30 Shares

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Ghomas Joseph Ballere 5260 3 rd Pd FILING FEE: 8 Lake Worth, Je 33467

FILING FEE: \$70.00

### ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Pres - Lucille Battelesse 5260 3 rd RR Lake Work, 21 33467

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

3 day of \_\_\_\_\_\_\_, 19 96.

(An additional article must be added if an effective date is requested.)

Leadle Batteloxe
Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

L. A. B. Metal Warks Dre.

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

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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 revistered agen: 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.

Homes Joseph 3 Holene 3-6-96 (SIGNATURE) (DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314