

P96000095474

TRANSMITTAL LETTER

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

300001998153--6
-11/06/96--01103--012
*****78.75 *****78.75

SUBJECT: LAUREN INVESTMENTS INC.
(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
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: CYNTHIA JACKSON
Name (Printed or typed)

1007 EAGENS CREEK CT.
Address

OVIEDO, FLORIDA, 32765
City, State & Zip

(407) 359-5035
Daytime Telephone number

FILED
96 NOV 22 AM 9:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~WGT 11/22~~

AB 11/22

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

November 8, 1996

CYNTHIA JACKSON
1007 EAGENS CREEK CT.
OVIEDO, FL 32765

SUBJECT: LAUREN INVESTMENTS, INC.
Ref. Number: W96000023771

We have received your document for LAUREN INVESTMENTS, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(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.

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) 487-692.

Teresa Brown
Corporate Specialist

Letter Number: 396A00051261

ARTICLES OF INCORPORATION

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:

E. LAUREN INCORPORATED

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TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

1007 EAGENS CREEK, CT.
OUIEDO, FLORIDA, 32765

ARTICLE III SHARES

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

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CYNTHIA JACKSON
1007 EAGENS CREEK, CT.
OUIEDO, FLORIDA, 32765

See instructions for officers/directors

CYNTHIA JACKSON
1007 EAGENS CREEK, CT.
OVIDO, FLORIDA, 32765

14th day of NOVEMBER, 19 96.

Cynthia Jackson
Signature

Signature

Signature

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.

1. The name of the corporation is:

E. LAUREN INCORPORATED
—————

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

CYNTHIA JACKSON
(NAME)

1007 EAGENS CREEK CT.
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

OUIEDO, FLORIDA, 32765
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

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.

Cynthia Jackson
(SIGNATURE)

11-14-96
(DATE)