1000000043

Tallahassee, FL 32314

SUBJECT: Lombardo Creative Services, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one	(1) copy of the	articles of incorporation	and a check
An	•		

\$70.00

\$78.75

\$122.50

\$131.25

FROM:

Doragne Lombardo
Name (printed or typed)

201 SW 8 street

Address

Capl Coral FL 33991

City, State & Zip

941-772-8367

FEB 3. 4785B

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

ARTICLES OF INCORPORATION

97 JAN 30 PM 3: 57

SECONDARION SECONDA

OF

Lombardo Creative Services, Inc.

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:

Lombardo Creative Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

201 SW & street Cape Corol, FL 33991

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Dorayne Lombardo 201 SW 8st. Cape Corol, FL 33991

ARTICLE V INCORPORATOR(S)

tion is(are):
Doragne Lombardo 201 SW 8 street
Cape Corol, FL 33991
Carmine Lombardo 201 SW 8st, Cape Coral, FL 33991
Cape Coral, FL 33991
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
22 day of January 1997.
Sarayne Sombardo
Lanning Ambardo 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: Lombardo Creative
Services, Inc.
2. The name and address of the registered agent and office is:
Dorayne Lombardo
OOI SW 8 Street 3 mg (P.O. Box not acceptable)
Cape Coral, FL 33991
(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.

Daragne Sombardo ____