

DIVISION 97 JUN - 2 PM 1: 34 STATE DRATIONS

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

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**500002198425---**2 -06/02/97--01150--011 \*\*\*\*\*\*78.75 \*\*\*\*\*78.75

**\$131.25** 

Filing Fee,

Certified Copy & Certificate

LNG Invertments, Inc. SUBJECT:

(Proposed corporate name - must include suffix)

**\$122.50** 

Filing Fee

& Certified Copy

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

**\$70.00 \$78.75** Filing Fee Filing Fee & Certificate

ADDITIONAL COPY REQUIRED FROM: \_\_\_\_\_\_ Ginda K. Smith Name (Printed or typed) <u>4374 MediterrANEAN Rd</u> Address Lake Worth, FL 33461 City, State & Zip 561-439-7495 Daytime Telephone number

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

# ARTICLES OF INCORPORATION

### ARTICLE I NAME

The name of the corporation shall be:

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LNL Investments, Inc.

## ARTICLE II PRINCIPAL OFFICE

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

4374 Mediterranean Rd. Lake Worth, Florida 33461

#### ARTICLE III SHARES

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

one hundred (100) shares, of one dollar (\$1.00) par value per share.

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent is:

Linda K. Smith 4374 Mediterranean Rd. Lake Worth, Florida 33461

#### ARTICLE V INCORPORATOR

Linda K. Smith

The name and address of the incorporator to these Articles of Incorporation is:

4374 Mediterranean Rd. Lake Worth, Florida 33461 Signature/Incorporator

5.29.97

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.

X X it Signature/Registered Agent

5-29.97 Data

