## Form C. Trasfirmal Letter to Secretary of State Transit Tal ETTER 3974

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

200002210752--6 -06/12/97--01122--002 \*\*\*\*131.25 \*\*\*\*131.25

SUBJECT:	Cristal	( leaving	, LNC.	
(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	<b>\$78.</b>	75 <b>\[ \]</b> \$	122.50	\$131.25
Filing Fee	_		ng Fee	Filing Fee,
	& Certi	ficate & Cert	, -	Certified Copy & Certificate

Please return the photocopy to me with the filing date stamped on it.

FROM: Endy Gambon
Name (printed or typed)

15940 NE 1944 PL Address

North Miami Bench, FL 33162 City, State & Zip

305 - 821 - 2039 Daytime Telephone Number

JUN 13 4 65B

W97-13884



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 13, 1997

ENDY GAMBOA 15940 N.E. 19TH PLACE NORTH MIAMI BEACH, FL. 33162

SUBJECT: CRISTAL CLEANING, INC.

Ref. Number: W97000013884

We have received your document for CRISTAL CLEANING, INC. and check(s) totaling \$131.25. 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) 487-6925.

Letter Number: 197A00031840

Brenda Baker Corporate Specialist

## TRANSMITTAL LETTER

Department of State Division of Corporations P.O. 6327 Tallahassee, FL 32314 SUBJECT: Limears 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 \$78.75 \$122.50 **5131.25** Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate & Certified Copy Certified Copy & Certificate

Please return the photocopy to me with the filing date stamped on it.

FROM: Endy Gambon
Name (printed or typed)

15940 NE 1944 PL
Address

North Miami Bench, FL 33162
City, State & Zip

305 - 821 - 2039 Daytime Telephone Number



## **Articles of Incorporation**

- 1. The name of the corporation shall be: LIMCARS, Inc.
- 2. The principal place of business and mailing address of the corporation is:

15940 NE 19 th place, Suite 3 North Miami Beach, Fl 33162

- 3. The corporation shall have the authority to issue 100,000 shares of stock.
- The registered agent of the corporation is Endy Gamboa and the registered street address is 15940 NE 19th Place, suite 3, North Miami Beach, Fl 33162.
- 5. The initial Board of Directors shall have 2 members whose names and addresses are as follows:

Endy Gamboa 1

15940 NE 19th place, suite 3, North Miami Beach, Fi

33162

Jaime Acosta 55NE 174 Drive, North Miami Beach, FL 33162

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is Endy Gamboa whose street address is:

15940 NE 19th place, suite 3 North Miami Beach, Fl 33162

Dated 7/10/92

Incoporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 7/10/97

Registered Agent,