

P97000065946

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 3214

Imperial Lens Co.

SUBJECT: _____
(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: _____ Rochelle M. Lightfoot
Name (Printed or typed) 888882249548--7
415 N.W. 88th Terrace
Address
El Portal, Florida 33150
City, State, & Zip
305-751-0415
Daytime Telephone Number
-07/28/97--01140--020
*****78.75 *****78.75

FILED
97 JUL 28 PM 2:35
SECRET
TALLAHASSEE, FLORIDA

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

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.

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PALM BEACH
COUNTY, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Imperial Lens Co.

ARTICLES II PRINCIPAL OFFICE

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

**1125 N.E. 125th Street
North Miami, Florida 33161**

ARTICLE III SHARES

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

10,000

ARTICLE IV. INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Rochelle M. Lightfoot
415 N.W. 88th Terrace
El Portal, Florida 33150**

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 I (are):

**Greggory Taylor- President
1125 N.E. 125th Street
North, Miami Florida 33161**

**Serge Germana - President
1125 N.E. 125th Street
North, Miami Florida 33161**

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

**July 19 97
_____ day of _____, 19_____.**

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



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.**

Imperial Len Co.

1. The name of the corporation is _____

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

Rochelle M. Lightfoot

Name

415 N.W. 88 Terrace

(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

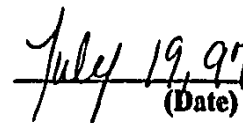
El Portal, Florida 33150

(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above state 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.



(Signature)



(Date)

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