

PA7000077381

Requestor's Name  
 C/O ASAP Services  
 Address  
 4001 SANTA BARBARA BLVD #120  
 NAPLES FL 34104  
 City/State/Zip Phone #

FILED  
 97 SEP -5 AM 11:47  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. LESO INC.  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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 -09/05/97--01050--016  
 \*\*\*\*122.50 \*\*\*\*122.50

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

**ARTICLES OF INCORPORATION**

of  
**LEJO, INC.**

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract hereby form a corporation under the laws of the State of Florida.

**FILED**  
97 SEP -5 AM 11:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - CORPORATE NAME**

The name of the corporation is:

**LEJO, INC.**

**ARTICLE II - DURATION**

This corporation shall exist perpetually unless dissolved according to Florida law.

**ARTICLE III - PURPOSE**

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

**ARTICLE IV - CAPITAL STOCK**

The corporation is authorized to issue TEN -THOUSAND shares ( 10,000 ) of Common Stock Dollar(s) ( \$ 1.00 ) par value Common Stock, which shall be designated "Common Shares."

**ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT**

The principal office, if known or the mailing address of the corporation is:

NAME	ASAP Services		
ADDRESS	4001 Santa Barbara Blvd., Suite 120		
CITY	Naples	FLORIDA	ZIP 34104

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	ELIZABETH FROLOFF		
ADDRESS	1616 Wellesley Circle Apartment 8		
CITY	Naples	Florida	ZIP 34116

**ARTICLE VI - INITIAL BOARD OF DIRECTORS**

This corporation shall have Two ( 2 ) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	ELIZABETH FROLOFF		
ADDRESS	1616 Wellesley Circle Apartment 8		
CITY	Naples	Florida	ZIP 34116

NAME	JOHN FROLOFF		
ADDRESS	1616 Wellesley Circle Apartment 8		
CITY	Naples	Florida	ZIP 34116

NAME			
ADDRESS			
CITY		Florida	ZIP

# ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	ELIZABETH FROLOFF		
ADDRESS	1616 Wellesley Circle Apartment 8		
CITY	Naples	Florida	ZIP 34116

NAME	JOHN FROLOFF		
ADDRESS	1616 Wellesley Circle Apartment 8		
CITY	Naples	Florida	ZIP 34116

NAME			
ADDRESS			
CITY		FLORIDA	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 2ND day of SEPT., 1997.

[Signature] (SEAL)  
[Signature] (SEAL)  
[Signature] (SEAL)

STATE OF FLORIDA )  
COUNTY OF Collier ) SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

[Signature]  
Signature  
[Signature]  
Signature  
\_\_\_\_\_  
Signature

Fl. Drivers Lic  
Form of Identification  
Fl. Drivers Lic  
Form of Identification  
\_\_\_\_\_  
Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that \_\_\_\_\_ executed these Articles of Incorporation, that I relied upon the form(s) of identification of the above named person(s) as indicated opposite each name, and that an oath (was) (was not) taken.

NOTARY RUBBER STAMP SEAL



Bruce Siper  
MY COMMISSION # CC608398 EXPIRES  
February 11, 2001  
BONDED THRU TROY FAIR INSURANCE, INC.

Witness my hand and official seal in the County and State last foresaid

this 2 day of Sept., 1997

[Signature]  
Notary Signature  
Bruce Siper  
Printed Notary Signature

August 20, 1997

LEJO, Inc. d.b.a. ASAP Services  
4001 Santa Barbara Blvd.  
Suite 120  
Naples, Florida 34104

Secretary of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: LEJO, Inc.  
(name of corporation)

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$ 122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

ELIZABETH FROLOFF  
(individual's name)

LEJO, INC  
(name of corporation)

**MAILING ADDRESS OF CORPORATION**

4001 Santa Barbara Blvd. , Suite 120

Naples, Florida 34104

PHONE

(941 ) 352-1654

Area Code

Number

Ext.

**CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT**

*CERTIFICATE OF REGISTERED AGENT*

*OF*

**LEJO, INC.**

*(name of corporation)*

**FILED**

**97 SEP -5 AM 11: 48**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:  
The above corporation, desiring to organize under the laws of the State of Florida with  
its registered office as indicated in the Articles of Incorporation

at **4001 Santa Barbara Blvd. , Suite 120**

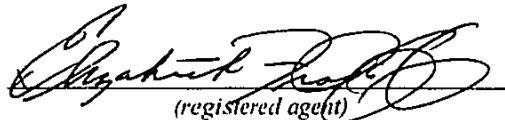
**Naples, Florida 34104**

has named **ELIZABETH FROLOFF**

located at the aforesaid address, as its Registered Agent to accept service of process within this State.

*ACKNOWLEDGEMENT*

Having been named as Registered Agent to accept service of process for the above stated corporation  
at the place designated in this certificate, and being familiar with the obligations of that position, I  
hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in  
keeping open said office.

  
*(registered agent)*