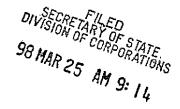
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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 500002468185--5 -03/25/98--01081--004 ******70.00 ******70.00

SUBJECT: LRP MACHINE SHOP INC (Proposed corporate name - must include suffix)			
Enclosed is an original a	nd one(1) copy of the articles	s of incorporation and a c	heck for :
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	RAMON PERDOMO Name (Printed or typed)		
	9155 NW 96th ST Address		
	MEDLEY F	L 33178	
_	City, State & Zip		a and a d esign
_	(305) 885	5-7166 Telephone number	



ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

LRP MACHINE SHOP INC

ARTICLE II PRINCIPAL OFFICE

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

9155 NW 96th ST MEDLEY FL 33178

ARTICLE III . SHARES

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

200 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

RAMON PERDOMO 9155 NW 96th ST

ARTICLE WEDLEY INCORPORATOR

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

LUZ PERDOMO PRESIDENT 9155 NW 96th ST MEDLEY FL 33178 RAMON PERDOMO TREASURER 9155 NW 96th ST MEDLEY FL 33178

Signature/Incorporator

Date

Incororator

Date

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

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

Signature/Registered Agent

Date