# TRANSMITTAL LETTER 000053960

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

SUBJECT: LUXURY LIGHTING 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 Filing Fee \_ 🔲 \$78.75

Filing Fee & Certificate □\$122.50

\$131.25

Filing Fee,

Filing Fee & Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: PATRICIA ARMOUR
Name (Printed or typed)

7605 PISSARRO DR 107
Address

ORLAND 0, FL 328/9
City, State & Zip

407 - 35 - 4 - 1260

Daytime Telephone number

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

## 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

The name of the corporation shall be:

LVXVRY LIGHTING INC.

# ARTICLE II PRINCIPAL OFFICE

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

P.O. BOX 69/227

ORLANDO, FL 32869

# ARTICLE III SHARES

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

200

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

PATRICIA ARMOUR

7605 PISSARRO DR APT 107 ORLANDO, FL 32819

#### INCORPORATOR ARTICLE V

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

PATRICIA ARMOUR

7605 PISSARNO DR ANT 107

ORLANDO, FL 32819

Signature/Incorporator

(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