P99000041635 TRANSMITTAL LETTER

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

SUBJECT:	L.I.T. Se (Proposed corpor	ruices, Inc rate name - must include suff	fix)	<u> </u>
		80	000028674 -05/07/990: *****87.50	1092009
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 of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COP	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Name (Pri	nted or typed) Mase Crossin ddress	SECRETARY OF STALLAHASSEE, FL	99 HAY -7 PHIZ:
	Jacksonvill City, S	<i>lle</i> , <i>Fl. 322</i> . tate & Zip		5:
	904-26 Daytime Te	8-3824 lephone number	The second secon	RECEIVE

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

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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purposes 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: L.I.T. Services, Inc.

ARTICLE II PRINCIPLE OFFICE

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

12381 Carriage Crossing Ct Jacksonville, Fl. 32258-1371

ARTICLE III SHARES

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

One Hundred (100) Shares.

ARTICLE IV INITIAL REGISTERED AGENT

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

Cai A. Leppert 12381 Carriage Crossing Ct Jacksonville, Fl. 32258-1371

ARTICLE V INCORPORATOR

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

Cai A. Leppert 12381 Carriage Crossing Ct Jacksonville, Fl. 32258-1371

Coi A Tannout Signatur (Vacamanatar

5-5-59

Date

Having been named as registered agent and to accept services of process for the above stated corporation 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 state statutes relating to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered agent.

Cai A. Leppert Signature/Incorporator

5-5-59

Date

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