## 790 CRANSMITTAL INFER 7493

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

SUBJECT:	LRK Spec	ecialties, Ir ate name - must include suffin	\	
			0002940: -07/23/990! *****78.75	120——5 1059009 *****78.75
Enclosed is an origin  \$70.00  Filing Fee	al and one(1) copy of the article  \$78.75  Filing Fee  & Certificate of Status	s of incorporation and a cost of section and	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM	: RONY SECONOMIC (Pr	FAC inted or typed)		•
	204 Thoree Isla	ddress AND	<u> </u>	0
	Halandale F City, 5 (954) 456781 Daytime To	State & Zip  State & Zip	TARY OF STATE HASSEE, FLORIDA	

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 NAME  The name of the corporation shall be: 1 R K South 1 R K So
ARTICLE I NAME  The name of the corporation shall be: LRK Specialties, Inc.,  SECRETARY OF STATE  ORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 204 Three Island B # 202  Hallandale, FL 33009
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
thirty thousand/30,000.00
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
RONY SEGAL
204 Three Island Blud APT 202 Hallandale FL. 33009 ARTICLE V INCORPORATOR
The name and address of the incorporator to these Afficies of Incorporation are:
Rony Segal 204 Three Island Blvd., Apt. 202
Hallandata F- 33009
Signature/incorporator 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 Dat