

P99000072818

TRANSMITTAL LETTER

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

500002957675--3
-08/12/99--01014--002
****122.50 ****78.75

SUBJECT:

Luvipil CORPORATION
(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
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

Luvipil CORPORATION
Name (Printed or typed)

3301 PIN OAK LN
Address

TAMPA FL 33618
City, State & Zip

813-908-3054
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 AUG 12 PM 1:15

FILED

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.

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99 AUG 12 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Luvipil CORPORATION

ARTICLE II PRINCIPAL OFFICE

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

3301 PIN OAK LN
TAMPA FL 33618

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

LUIS LOZANO
3301 PIN OAK LN
TAMPA FL 33618

ARTICLE V INCORPORATOR

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

LUIS LOZANO
3301 PIN OAK LN
TAMPA FL 33618



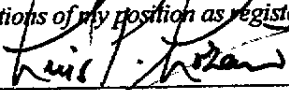
Signature/Incorporator

8/10/1999

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

8/10/1999

Date