TRANSMITTAL LETTER

Department of State
Division of Corporations

P. O. Box 6327 Tallahassee, FL 32314						
SUBJECT:	LAROSA Lo (Proposed corpor	NEHAUL, Anate name - must include suf	// C .			
.•			*****)3016; /18/990 ***78.75	1071	2 -006 :78.75
Enclosed is an original	and one(1) copy of the article	s of incorporation and a c	heck for :			
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	Siling Fee, Certified Co & Certificat			
		ADDITIONAL CO	PY REQUIRE	ED .		
FROM: _	Richard A. Wollner, Name (P	CPA, P.A.		N.		met.:
<u>.</u>	2917 West State Road			3E(
	Address Longwood, Florida 32779			ORETARY	<u>T</u>	-
-	City, (407) 869-6434	State & Zip		8 PH 1: Y OF STAT NEE, FLORI	FILED	- -
•	Daytime Telephone number			DE 6		•

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:

LAROSA LONGHAUL, INC.

ARTICLE II PRINCIPAL OFFICE

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

7721 West Ridge Ct. Orlando, Florida 32810

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Richard A, Wollner, CPA 2917 West State Road 434, Suite 151 Longwood, Florida 32779

ARTICLE V INCORPORATOR

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

Richard A, Wollner, CPA 2917 West State Road 434, Suite 151 Longwood, Florida 32779 99 OCT 18 PM 1: 16
SECRETARY OF STATE

file strolle

Date

Signature/Incorporator

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