

P0000008732c

Requester's Name

**Myers
Business
Services,
Inc.**

P.O. Box 10189
Brooksville, FL 34603-0189

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #) 200003378022--0
-08/30/00--01070--020
*****78.75 *****78.75

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certification Status

FILED
00 SEP 14 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NEW FILINGS

☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

W-21731
9/5

Examiner's Initials

gj



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

September 5, 2000

MYERS BUSINESS SERVICES, INC.
P.O. BOX 10189
BROOKSVILLE, FL 34603-0189

SUBJECT: SAVOIR FAIRE, INC.
Ref. Number: W00000021739

We have received your document for SAVOIR FAIRE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6878.

Alan Crum
Document Specialist

Letter Number: 200A00046954

ARTICLES OF INCORPORATION

OF

L P RESTORATIONS, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, herewith adopt the following Articles of Incorporation.

ARTICLE I NAME

The name of this corporation shall be as stated above.

ARTICLE II PRINCIPAL PLACE OF BUSINESS

The principal place of business of this corporation shall be:
15 Paradise Plaza; PMB#128; Sarasota, FL 34239

ARTICLE III NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful business permitted under the laws of the United States, the State of Florida, or any other state.

ARTICLE IV CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is Seven Thousand Five Hundred (7500) shares of common stock with a par value of \$1.00.

ARTICLE V TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI OFFICERS AND DIRECTORS

The name and street address of this initial officer(s) and director(s) who shall hold office the first year of the corporation's existence or until his/her successor is elected is:

Lisa A. Petrella
NAME:

President
TITLE:

15 PARADISE PLAZA #128 SARASOTA, FL 34239
ADDRESS:

NAME:

TITLE:

ADDRESS:

NAME:

TITLE:

ADDRESS:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 SEP 14 PM 2:32

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ARTICLE VII INCORPORATOR

The name and address of the person(s) executing these Articles of Incorporation is:

Lisa A. Petrella 15 PARADISE PLAZA, #12B SARASOTA, FL 34239
NAME: ADDRESS:

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation
this 21 day of August, 2000

Lisa A. Petrella
Incorporator

CERTIFICATE DESIGNATING REGISTERED AGENT & OFFICE

Pursuant to the provisions of Section 607.325, FL Statutes, the below named corporation,
organized under the laws of the State of Florida, submits the following statement in
designating its registered agent and office, in the State of Florida.

1. The name of the corporation is

L P RESTORATIONS, INC.

2. The name and address of the registered agent and office is:

LISA PETRELLA 15 PARADISE PLAZA, #12B, SARASOTA, FL
34239

Lisa A. Petrella 8/27/2000
Incorporator Dated:

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE,
I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO
COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE
PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT
THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FL STATUTES.

Lisa A. Petrella 8/27/2000
REGISTERED AGENT DATED:

Lisa A. Petrella

00 SEP 14 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED