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TRANSMITTAL LETTER

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

SUBJECT: Lotu	s Born Seminars Inc.		
5024201	(PROPOSED CORPORA	YTE NAME – <u>MUST INCL</u>	UDE SUPERS)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00	☑ \$78.75	□ \$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
•	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate o
		1	Status
		ADDITIONAL CO	PY REQUIRED
FROM: J	ames Nunn		
	Nam	(Printed or typed)	
	601 s Newport Ave #4		
		Address	.
	Tampa, FI 33606		
	• •	, State & Zip	
	City	, State of Lip	
	813-503-6728		
	Daytime	Telephone number	•

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

'ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Lotus Born Seminars Inc. ED

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FALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 601 S Newport Ave #4 Tampa, Fl 33606

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Educational Seminars

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Michael Pagani 601 S newport ave #4 tampa fl 33606 President /// James Nunn 601 s Newport ave #4 Tampa fl 33606 Director of Operations

ARTICLE VI REGISTERED AGENT

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

James Nunn 601 s Newport ave #4 Tampa, fl 33606

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Pagani 601 S Newport ave #4 Tampa, Fl 33606

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Date

126/04

Date

Signature/Incorporator