

P04000031096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

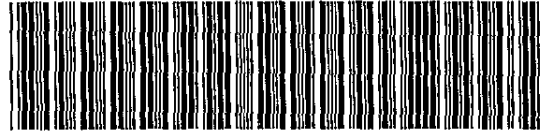
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900028306529

02/11/04--01008--010 **87.50

FILED
04 FEB 10 AM 11:45
SECRETARY OF STATE
FALL ARIZONA

gje2/11

TRANSMITTAL LETTER

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

SUBJECT: Lisa Schaffner Decorative Painting, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Lisa Schaffner
Name (Printed or typed)

50 Ballard Lane
Address

Palm Coast, FL 32137
City, State & Zip

386 447-1071
Daytime Telephone number

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

**ARTICLES OF INCORPORATION
FOR
LISA SCHAFFNER DECORATIVE PAINTING, INC.**
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

LISA SCHAFFNER DECORATIVE PAINTING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

PLACE OF BUSINESS:
50 BALLARD LANE
PALM COAST, FL 32137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THIS CORPORATION MAY ENGAGE OR TRANSACT IN ANY OR ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA, OR ANY OTHER STATE, COUNTRY, TERRITORY OR NATION.

ARTICLE IV SHARES

The number of shares of stock is:

THE MAXIMUM NUMBER OF SHARES OF STOCK THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS 1000 SHARES OF COMMON STOCK HAVING A \$1.00 PAR VALUE.

ARTICLE V INITIAL DIRECTORS (optional)

The name(s), address(es) and title(s):

THIS CORPORATION SHALL HAVE NO DIRECTORS, INITIALLY. THE AFFAIRS OF THE CORPORATION WILL BE MANAGED BY THE SHAREHOLDERS UNTIL SUCH TIME DIRECTORS ARE DESIGNATED AS PROVIDED BY THE BYLAWS.

ARTICLE VI INITIAL OFFICERS (optional)

The name(s), address(es) and title(s):

LISA SCHAFFNER
PRESIDENT
50 BALLARD LANE
PALM COAST, FL 32137

FILED
04 FEB 10 AM 11:45
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII REGISTERED AGENT

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

LISA SCHAFFNER
PRESIDENT
50 BALLARD LANE
PALM COAST, FL 32137

ARTICLE VIII INCORPORATOR

The name and address of the Incorporator is:

LISA SCHAFFNER
PRESIDENT
50 BALLARD LANE
PALM COAST, FL 32137

ARTICLE XI TERM OF EXISTENCE

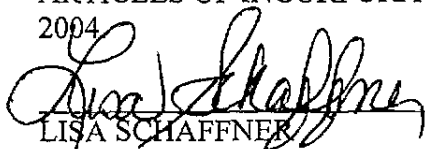
THIS CORPORATION IS TO EXIST PERPETUALLY.

ARTICLE X PREEMPTIVE RIGHTS

EVERY SHAREHOLDER UPON SALE FOR CASH OF ANY NEW STOCK OF THIS CORPORATION OF THE SAME KIND, CLASS, OR SERIES AS THAT WHICH HE ALREADY HOLDS, SHALL HAVE THE RIGHT TO PURCHASE HIS PRO RATA SHARE THEREOF AT THE PRICE AT WHICH IT IS OFFERED TO OTHERS.

IN WITNESS WHEREOF, THE UNDERSIGNED SUBSCRIBERS HAVE EXECUTED THESE ARTICLES OF INCORPORATION ON THIS 6 DAY OF Feb

2004


LISA SCHAFFNER

STATE OF FLORIDA
COUNTY FLAGLER

BEFORE ME PERSONALLY APPEARED LISA SCHAFFNER, TO ME WELL KNOWN AND KNOW TO ME TO BE THE INDIVIDUALS DESCRIBED IN AND WHO EXECUTED THE FOREGOING INSTRUMENT, AND THEY PURPOSE THEREIN EXPRESSED.

WITNESS MY HAND AND OFFICIAL SEAL THIS 6 DAY OF Feb 2004, IN PALM COAST, COUNTY AND STATE AFORESAID.


NOTARY PUBLIC

MY COMMISSION EXPIRES:

LISA SCHAFFNER DECORATIVE PAINTING, INC.-2 - 2/5/2004



Joanna Reeley
My Commission DD167490
Expires January 24, 2007

ARTICLE VII REGISTERED AGENT

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

LISA SCHAFFNER
PRESIDENT
50 BALLARD LANE
PALM COAST, FL 32137

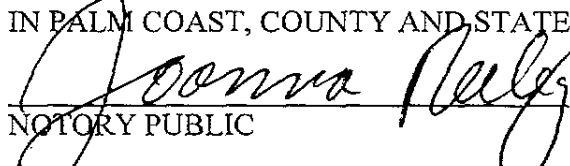
IN WITNESS WHEREOF, THE UNDERSIGNED SUBSCRIBERS HAVE EXECUTED THESE
ARTICLES OF INCORPORATION ON THIS 6 DAY OF Feb,
2004.


LISA SCHAFFNER

STATE OF FLORIDA
COUNTY FLAGLER

BEFORE ME PERSONALLY APPEARED LISA SCHAFFNER, TO ME WELL KNOWN AND
KNOW TO ME TO BE THE INDIVIDUALS DESCRIBED IN AND WHO EXECUTED THE
FOREGOING INSTRUMENT, AND THEY PURPOSE THEREIN EXPRESSED.

WITNESS MY HAND AND OFFICIAL SEAL THIS 6 DAY OF Feb 2004,
IN PALM COAST, COUNTY AND STATE AFORESAID.


NOTARY PUBLIC

MY COMMISSION EXPIRES:



Joanna Reeley
My Commission DD167490
Expires January 24, 2007

REGISTERED AGENT ACCEPTANCE

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 FLORIDA STATUTES.

SIGNATURE *Lisa Schaffner*
LISA SCHAFFNER

TITLE PRESIDENT

DATE 2/6/04

FILED
04 FEB 10 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA