

PO4000086265

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

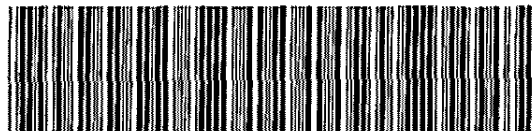
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUN -1 PM 3:12

TRANSMITTAL LETTER

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

SUBJECT: ELISE THORNLEY, 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: ELISE M. THORNLEY

Name (Printed or typed)

3487 WEST SAINT BRIDES CIRCLE

Address

ORLANDO, FLORIDA 32812

City, State & Zip

407-282-7368

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:
ELISE THORNLEY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
3487 WEST SAINT BRIDES CIRCLE
ORLANDO, FLORIDA 32812

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
MEETING PLANNER

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):
ELISE M. THORNLEY-DIRECTOR
3487 WEST SAINT BRIDES CIRCLE
ORLANDO, FLORIDA 32812

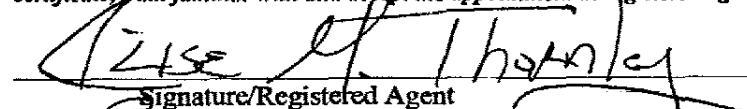
ARTICLE VI REGISTERED AGENT

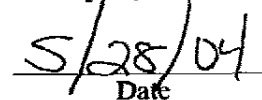
The name and Florida street address of the registered agent is:
ELISE M. THORNLEY
3487 WEST SAINT BRIDES CIRCLE
ORLANDO, FLORIDA 32812

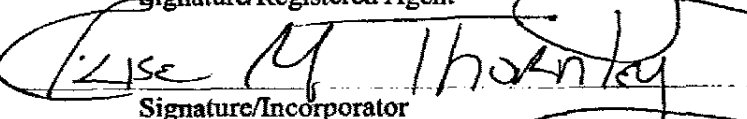
ARTICLE VII INCORPORATOR

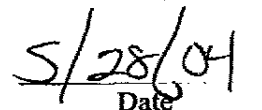
The name and address of the Incorporator is:
ELISE M. THORNLEY
3487 WEST SAINT BRIDES CIRCLE
ORLANDO, FLORIDA 32812

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


Signature/Incorporator


Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUN - 1 PM 3:13