# P0900004691

(Requestor's Name)				
(Address	)			
(Address)	)			
(City/Stat	e/Zip/Phone #)			
PICK-UP	] WAIT	MAIL		
(Business	s Entity Name)	:		
(Docume	nt Number)			
Certified Copies	Certificatés of	Status		
Special Instructions to Filing	Officer:	· .		
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Office Use Only

254-524 W09-32891



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DIVISION OF CORPORATIONS

2009 JUL 29 PM L: 1.7

4/30/09

### **COVER LETTER**

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

SUBJECT: FOSTER ENTERPRISES, IN.						
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )						
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	S \$78.75 Filing Fee & Certificate of Status ADDITIONAL CO	Status	f		
_ <u></u>	EISA L. FOST Name (5025W.63) Gaines VIIIe, 4 (352) 262-3 Daytime T	Address  -/ORISA 32 State & Zip	608	SECRETARY OF STATE DIVISION OF CORPORATION		
	E-mail address: (to be use	d for future annual report n	otification)			

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

Please sete: I was adviced to note that I am requesting a certificate of status instead of a sertified copy by a small business courselos at the Small Business Developement Center in Consorte of the of the Small



## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

July 17, 2009

LEISA L. FOSTER 4502 SW 63RD BOULEVARD GAINESVILLE, FL 32608

SUBJECT: FOSTER ENTERPRISES, INC.

Ref. Number: W09000032891

We have received your document for FOSTER ENTERPRISES, 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 list the city name in its entirety abbreviation is not acceptable.

Please return the corrected 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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 709A00024661

# 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: LEISAL. FOSTER ENTER PRISES, INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

45028, W, 63rd Block

GAINESVILLEFLORIDA 37618

#### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

ALL and Amy Lawful Businesses

#### ARTICLE IV <u>SHARES</u>

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

LEISA LIFOSTER 450 Z S.W, 63 rd Blvd.

Gainesville, Florida 32608

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

LEISA LIFOSTER 4502 S.W. (Brd Blvd.

Gaines Ville, Flore DA 32608

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LEISA LIFOSTER 4502 S.W. 63rd Blud-Gaines Ville, FloribA 32608

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 agrey to act in this capacity

Signature/Registered Agent

July 14, 2009
July 14, 2009