

P09060075104

(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



400160221844

09/04/09--01025--018 **87.50

FILED
09 SEP -4 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EP 9/9/09

COVER LETTER

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

SUBJECT: L. Lisbon, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: L. Lisbon, Inc.
Name (Printed or typed)

1971 Grand Bay Circle #204
Address

Lakeland, FL 33810
City, State & Zip

(863) 934-5919
Daytime Telephone number

llisbon1@yahoo.com
E-mail address: (to be used for future annual report notification)

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: L. Lisbon, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1971 Grand Bay Circle, # 204
Lakeland, FL
33810

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To transact any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as they may be amended from time to time.

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):

Lamonica D. Lisbon, 1971 Grand Bay Circle, #204 Lakeland, FL 33810, President & CEO
Florence Grays, 7230 Pebble Pass Loop, Lakeland, FL 33810, Secretary

ARTICLE VI REGISTERED AGENT

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

Lamonica D. Lisbon
1971 Grand Bay Circle, #204
Lakeland, FL 33810

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lamonica D. Lisbon
1971 Grand Bay Circle, #204
Lakeland, FL 33810

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



Signature/Incorporator

May 28, 2009

Date

May 28, 2009

Date

FILED
09 SEP -4 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA