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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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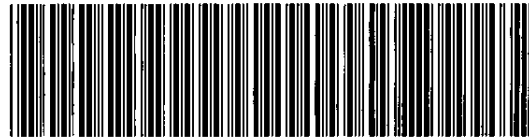
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
FILED

VN

## COVER LETTER

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

SUBJECT: Liisa Properties II, 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: Heidi Uuranniemi

Name (Printed or typed)

7634 NW 6th Ave.

Address

Boca Raton, FL 33487

City, State & Zip

561-994-0280

Daytime Telephone number

heidi522@hotmail.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: Liisa Properties II, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
3280 Cynthia Lane, Apt. 203  
Lake Worth, FL 33461-5828

Mailing address, if different is:

7634 NW 6th Ave.  
Boca Raton, FL 33487

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Real estate investment.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Lisa Marianino, President  
Address: 3280 Cynthia Lane, Apt. 203  
Lake Worth, FL 33461-5828

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: Heidi Uuranniemi, Secretary  
Address: 7634 NW 6th Ave.  
Boca Raton, FL 33487

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Heidi Uuranniemi  
Address: 7634 NW 6th Ave.  
Boca Raton, FL 33487

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Heidi Uuranniemi  
Address: 7634 NW 6th Ave.  
Boca Raton, FL 33487

*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*

Heidi Uuranniemi  
Required Signature/Registered Agent

11/29/10  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Heidi Uuranniemi  
Required Signature/Incorporator

11/29/10  
Date

FILED  
AND  
RECORDED  
10 DEC -1 AM 9:36  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA