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TALLAHASSEE FLORIDA

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

SUBJECT: LAW OFFICE OF LISA J. KLEINBERG, P.A.
(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 J. KLEINBERG
Name (Printed or typed)

2189 RINGLING BLVD
Address

SARASOTA, FL 34237
City, State & Zip

941-366-9720
Daytime Telephone number

LISA@SARASOTAFAMILYLAW.NET
E-mail address: (to be used for future annual report notification)

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

ARTICLES
AND
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ARTICLES OF INCORPORATION

11 JAN 10 PM 4:06

LAW OFFICE OF LISA J. KLEINBERG, P.A.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article I - Name

The name of this corporation shall be Law Office of Lisa J. Kleinberg, P.A.

Article II - Principal Office

Principal Street address: 2189 Ringling Boulevard
Sarasota, Florida 34237

Article III - Purpose

The purpose for which the corporation is organized is: Law Office

Article IV - Shares

The number of shares of stock is: 100

Article V - Initial Officers and/or Directors

Name and Title: Lisa J. Kleinberg, President
Address: 2189 Ringling Boulevard
Sarasota, Florida 34237

Article VI - Registered Agent

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

Name: Lisa J. Kleinberg
Address: 2189 Ringling Boulevard
Sarasota, Florida 34237

Article VII - Incorporator

The name and address of the Incorporator is:

Name: Lisa J. Kleinberg
Address: 2189 Ringling Boulevard
Sarasota, Florida 34237

Article VIII - Effective Date

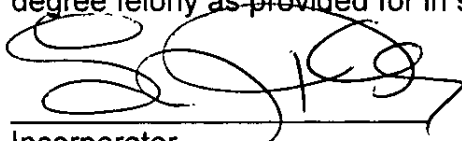
The effective date of this corporation shall be January 3, 2011.

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.


Registered Agent

1/6/11
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.


Incorporator

1/6/11
Date

11 JAN 10 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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