

P11000033561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

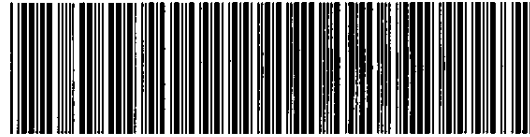
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILING CANCELLED
RETURNED CHECK

04/05/11--01018--013--**78.75

11 APR -5 PM 12:02
PROPERTY OF STATE
TREASURER
ALASKA

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JB 4/6

COVER LETTER

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

SUBJECT: Limperis Portraits, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Michael Limperis
Name (Printed or typed)
2175 SE 6th Street, Suite J
Address
Pompano Beach, FL 33062
City, State & Zip
954 854-1009
Daytime Telephone number
NOWBONES@Gmail.com
E-mail address: (to be used for future annual report notification)

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

FILING CANCELLED
RETURNED CHECK

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:

Limperis Portraits, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

2175 SE 6th St. Suite J.
Pompano Beach, FL 33062

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ON LOCATION DIGITAL PHOTOGRAPHY

ARTICLE IV SHARES

The number of shares of stock is:

48

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Limperis President

Address: 2175 SE 6th St., Suite J.
Pompano Beach, FL 33062

Name and Title:

Name and Title:

Address:

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: Michael Limperis
Address: 2175 SE 6th St., Suite J.
Pompano Beach, FL 33062

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Michael Limperis
Address: 2175 S.E. 6th St., Suite J.
Pompano Beach, FL 33062

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


Required Signature/Registered Agent

2-9-11

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.


Required Signature/Incorporator

2-9-11

Date