

P110000066608

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

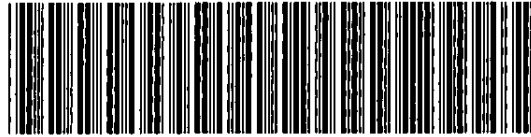
(Business Entity Name)

(Document Number)

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

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Office Use Only



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RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2011 JUL 25 PM 1:31  
NOT FORWARDED  
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SUFFICIENCY OF FILING

FILED  
11 JUL 26 PM 1:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: Inspiring Style 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: Marshello Lamb  
Name (Printed or typed)

1894 Rodriguez Ln  
Address

Tall Fla 32310  
City, State & Zip

850-702-7418  
Daytime Telephone number

Marshello Lamb @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:

Inspiring style Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

1894 Rodrique Ln  
Fall 719 32310

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Apparel, Accessories & Decor

**ARTICLE IV SHARES**

The number of shares of stock is: 1

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

Name and Title: Marshall Lamb  
Address: 1894 Rodrique Ln  
Fall 719 32310

Name and Title:  
Address:

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: Marshall Lamb  
Address: 1894 Rodrique Ln  
Fall 719 32310

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Marshall Lamb  
Address: 1894 Rodrique Ln  
Fall 719 32310

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

Marshall Lamb

Required Signature/Registered Agent

7-25-11

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.

Marshall Lamb

Required Signature/Incorporator

7-25-11

Date

FILED  
11 JUL 26 PM 1:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA