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(Requestor's Name)

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☐ PICK-UP

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DEPARTMENT OF STATE

12/28/11

COVER LETTER

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

SUBJECT: Live Greeters, 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: Michael Sylvan

Name (Printed or typed)

750 N. TAMiami TR Apt. 1402

Address

SARASOTA FL 34236

City, State & Zip

941-268-3353

Daytime Telephone number

sylvan28@hotmail.com

E-mail address: (to be used for future annual report notification)

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

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Division of Corporations

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: Live Greeters, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
242 S. Washington Blvd.
#152
Sarasota, FL 34236

Mailing address, if different is:
750 N. Tamiami Tr. Apt. 1402
Sarasota, FL 34236

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Sylvan - PRESIDENT Name and Title: _____

Address: 242 S. Washington Blvd. Address: _____
#152
Sarasota, FL 34236

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 Sylvan
Address: 242 S. Washington Blvd. #152
Sarasota, FL 34236

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Michael Sylvan
Address: 242 S. Washington Blvd. #152
Sarasota, FL 34236

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]
Required Signature/Registered Agent

12-14-11
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.

[Signature]
Required Signature/Incorporator

12-14-11
Date

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DIVISION OF CORPORATIONS