

P12,000089051

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

RECEIVED
12 OCT 22 PM 12: 14
SECRETARY OF STATE
FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
Lise Partner, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 OCT 22 AM 10: 40

Electronic Filing Menu Corporate Filing Menu Help

10/22/12
10/22/2012 11:46

<https://efile.sunbiz.org/scripts/efilcovr.exe>

COVER LETTER

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

SUBJECT: LISE PARTNER, 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: KATE TAYLOR
Name (Printed or typed)

14 RUE DALPOZZO
Address

NICE 06000 FRANCE
City, State & Zip

Daytime Telephone number

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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12 OCT 22 AM 10:40

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: LISE PARTNER, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
14 RUE DALPOZZO
NICE 06000
FRANCE

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The nature of the business to be conducted or promoted and the purposes of the Corporation are to engage in any lawful act or activity for which corporations may be organized under the Florida Business Corporation Act.

ARTICLE IV SHARES

The number of shares of stock is: 100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KATE TAYLOR - D. P. T. S Name and Title: _____
Address: 14 RUE DALPOZZO Address: _____
NICE 06000
FRANCE

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: C T Corporation System
Address: 1200 South Pine Island Road
Plantation, Florida 33324

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: KATE TAYLOR
Address: 14 RUE DALPOZZO
NICE 06000 FRANCE

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
C T Corporation System

By: Barbara A. Burke Barbara A. Burke 10/22/12
Required Signature/Registered Agent Special Assistant-Secretary 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.

Kate Taylor 10/19/2012
Required Signature/Incorporator Date