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SECRETARY OF STAJE

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COVER LETTER

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

SUBJECT. Lew	vis E. Garlisi, P.A	١.	
SUBJECT.	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l 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 o Status
		ADDITIONAL CO	
_		e (Printed or typed)	
34	418 Handy Road	, # IUZ Address	
Ta	ampa, Florida 33	618	
8)	City, 813) 951-5134	State & Zip	
	•	Celephone number	
ga	arlisipa@gmail.co		
	E-mail address: (to be use	d for future annual report r	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) ·FILED SECRETARY OF STATE DIVISION OF CORPORATIONS The name of the corporation shall be: Lewis E. Garlisi, P.A. 12 DEC 31 AM 9:55 PRINCIPAL OFFICE ARTICLE II Mailing address, if different is: Principal street address 3418 Handy Road, #102 P.O. Box 17938 Tampa, Florida 33618 Tampa, Florida 33682 ARTICLE III PURPOSE The purpose for which the corporation is organized is: All professional legal services. ARTICLE IV SHARES The number of shares of stock is: 10 INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Lewis E. Garlisi, President Name and Title: 3418 Handy Road, #102 Address: Address: Tampa, Florida 33618 _____ 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: Lewis E. Garlisi Name: 3418 Handy Road, #102 Address: Tampa, Florida 33618 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Lewis E. Garlisi Name: P.O. Box 17938 Address: Tampa, Fiorida 33682 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 12/28/12 Required Signature/Registered Agent 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

12/28/12

Date