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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
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PICK-UP	☐ WAIT	MAIL.		
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(Bu	siness Entity Nar	ne)		
(D-		· · · · · · · · · · · · · · · · · · ·		
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			

Office Use Only



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01/20/15--01016--003 **78.75

DIVISION OF CORPORATION

2 01/22/14

COVER LETTER

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

Lis SUBJECT:	sa Marie Hill Inc.		
SOBJECT.	(PROPOSED CORPO	RATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an	original and one (1) copy of the a	articles of incorporation and	d a check for:
☐ \$70.0 Filing Fe	\$78.75 ee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL COPY REC		PPY REQUIRED
FROM:	Lisa Marie Hill	me (Printed or typed)	
	27750 Cowdrey Street #206		
		Address	
	Wesley Chapel, FL 33544		
	Cit	y, State & Zip	
	8132105224		
	Daytime	Telephone number	
	lisamarie@strongerpulse.com	m	
•	E-mail address: (to be u	sed for future annual report	notification)

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corpora	Lisa Marie Hill Inc.			
27750 Cowdrey S	Principal street address	Mailing address,	Mailing address, if different is:	
Vesley Chapel, F	L 33544			
RTICLE III PUR	POSE automo he corporation is organized is:	tive sales and marketing se	rvices	
			DIVISION 15 JAN	
RTICLE IV SHA			TARY OF STATE OF CORPORATIONS	
RTICLE V INIT	Lisa Marie Hill CEO : 27750 Cowdrey Street #206	PRS Name and Title:		
Address	Wesley Chapel, FL 33544	Address:		
Name and Title:		Name and Title:		
Address				
Name and Title:		Name and Title:		
Address				
				

- Name ar	nd Title:	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable	a) of the registered agent is:	
Name:	Lisa Marie Hill	of of the registered agent is.	
Address:	27750 Cowdrey St #206		
	Wesley Chapel, FL 33544		01V1S 15
ARTICLE VII	INCORPORATOR		FIL SION OF C JAN 20
The name and a	ddress of the Incorporator is:		C _ L
Name:	Lisa Marie Hill		PH L:
Address:	27750 Cowdrey St #206	<u>. </u>	25 ST TON
	Wesley Chapel, FL 33544		
Having been nar this certificate, L	nied as registered agent to accept service of pro am familiar with and accept the appointment as	cess for the above stated corpor registered agent and agree to a	ation at the place designated in ct in this capacity
	That I was		0/15/14
\	Required Signature/Registered Agent		Date
I submit this document to the	cument and affirm that the facts stated herein to Department of State constitutes a third degree fe	are true. I am aware that the fa clony as provided for in s.817.15	alse information submitted in a 5, F.S. O\ /15/14
	Required Signature/Incorporator		Date

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