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Florida Department of State
Division of Corporations
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To:

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

From:

    Account Name   : CAPITOL SERVICES, INC.
    Account Number : I20160000017
    Phone   : (855)498-5500
    Fax Number   : (800)432-3622

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
LYON ESTATES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	$78.75

COVER LETTER

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

SUBJECT: <u>Lyon Estates, Inc.</u>
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)

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: <u>Burton A. Mitchell, Esq., Jeffer Mangels Butler & Mitchell LLP</u>
Name (Printed or typed)

<u>1900 Avenue of the Stars, 7th Floor</u>
Address

<u>Los Angeles, CA 90067</u>
City, State & Zip

<u>310-203-8080</u>
Daytime Telephone number

<u>acaswell@fwllp.com</u>
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: **Lyon Estates, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
18975 Collins Ave, Unit 4200
Sunny Isles Beach, FL 33160

Mailing address, if different is:
c/o Fineman West & Company LLP
801 S. Figueroa Street, Suite 1000
Los Angeles, CA 90017

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: **entertainment**

ARTICLE IV SHARES
The number of shares of stock is: **10,000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jonathan Rotem - Director, President, Secretary & CFO   Name and Title: _____

Address   **18975 Collins Ave, Unit 4200**   Address: _____

Sunny Isles Beach, FL 33160

Name and Title: _____   Name and Title: _____

Address _____   Address: _____

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: Capitol Corporate Services, Inc.

Address: 515 East Park Avenue, 2nd Floor

            Tallahassee, FL 30096

ARTICLE VII   INCORPORATOR

The _name and address_ of the Incorporator is:

Name: Jonathan Rotem

Address: 18975 Collins Ave, Unit 4200

            Sunny Isles Beach, FL 33160

ARTICLE VIII   EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Leigh Johnson   Leigh Johnson, Asst. Secretary on behalf
                       of Capitol Corporate Services, Inc.
_____   _____
       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.

                                                                 8/10/2021
_____   _____
Required Signature/Incorporator   Date