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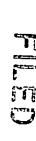
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Cover Letter

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

SUBJECT: The Law Office of Christopher H. Lee, P.A.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

□ \$70.00

፟ \$78.75

□ \$78.75

□ \$87.50

Filing Fee

Filing Fee

Filing Fee

Filing Fee, Certified Copy

& Certificate of Status

& Certified Copy

& Certificate of Status

FROM:

Christopher H. Lee

Name

612 W. Surf Spray Lane

Address

Ponte Vedra Beach, FL 32082

City, State & Zip

302-494-7204

Daytime Phone Number

christopherhleeesq@gmail.com____

Email address

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

Sincerely,

Christopher H. Lee

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: The Law Office of Christopher H. Lee, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address: 645 Mayport Road, Suite 5

Atlantic Beach, FL 32233

ARTICLE III PURPOSE

The purpose for which the corporation is organized is for the practice of law.

ARTICLE IV SHARES

The number of shares of stock is 1.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christopher H. Lee, Managing Director

Address: 645 Mayport Road, Suite 5

Atlantic Beach, FL 32233

ARTICLE VI REGISTERED AGENT

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

Name: Christopher H. Lee

Address: 612 W Surf Spray Lane

Ponte Vedra Beach, FL 32082

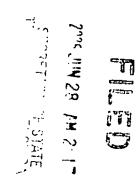
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Christopher H. Lee

Address: 645 Mayport Road, Suite 5

Atlantic Beach, FL 32233



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

Required Signature/Registered Agent

6/11/24 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

Date

ARTICLES OF INCORPORATION

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

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Atlantic Beach, FL 32233

ARTICLE VI REGISTERED AGENT

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

Name: Christopher H. Lee

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Ponte Vedra Beach, FL 32082

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Required Signature/Registered Agent

D-40

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Required Signature/Incorporator

Date

