

P98000036792

Lisa Williams
Requestor's Name
P O Box 516
Address
Naples FL 34106
City/State/Zip Phone #

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*****70.00 *****70.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
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3. _____
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4. _____
(Corporation Name) (Document #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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630
998 21975
F. CHESSER APR 23 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 7, 1998

LISA WILLIAMS
P O BOX 516
NAPLES, FL 34106

SUBJECT: LISA WILLIAMS ASID, P.A.
Ref. Number: W98000007726

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TALLAHASSEE, FLORIDA

We have received your document for LISA WILLIAMS ASID, P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6904.

Freida Chesser
Corporate Specialist

Letter Number: 998A00018412

ARTICLES OF INCORPORATION

OF

LISA WILLIAMS ASID, P.A.

The undersigned, for the purpose of forming a corporation under the Florida Business Corporation Act hereby adopt the following articles of incorporation:

ARTICLE I

NAME

The name of the corporation is LISA WILLIAMS ASID, P.A..

ARTICLE II

DURATION

The term of existence of the corporation is perpetual.

ARTICLE III

PURPOSE

The corporation is formed to provide interior design and to transact any and all lawful business for which corporations may be incorporated under the Florida Business Corporation Act.

ARTICLE IV

CAPITAL STOCK

The aggregate number of shares which the corporation has authority to issue is 7,500, all of which shall be common shares with a par value of \$1.00

ARTICLE V

PRINCIPAL OFFICE, REGISTERED OFFICE & MAILING ADDRESS

The principal place of business, registered office and mailing address of the corporation is 5056 Sand Dollar Lane Naples, Florida 34103, and the name of the initial registered agent at such address is Lisa Williams. The registered offices' phone number is 941-434-7328.

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ARTICLE VI

MANAGEMENT

The business of the corporation shall be managed by the stockholders of the corporation rather than by a board of directors.

ARTICLE VII

INCORPORATORS, SUBSCRIBERS, STOCKHOLDERS AND OFFICERS

The initial subscriber, stockholder and officer is:

Lisa Williams	President, Secretary
5056 Sand Dollar Lane	Vice President, Treasurer
Naples, Florida 34103	

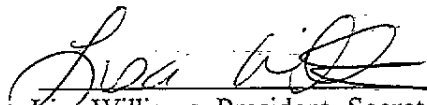
ARTICLE VIII

COMMENCEMENT OF EXISTENCE

The corporation shall be deemed to commence its existence when these Articles are filed with the Office of the Secretary of State, State of Florida.

IN WITNESS WHEREOF, I have subscribed my name this 1st day of

APRIL, 1998.



Lisa Williams, President, Secretary

STATE OF FLORIDA

COUNTY OF COLLIER

On this 1 day of April, 1998, before me personally appeared of
Lisa Williams, Florida Drivers License Number W452-533-60-529-0, known to me to be
the person whose name is subscribed to the within instrument, and acknowledged that she executed
the same for the purpose therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.



Belinda S. Meier
Notary Public
My Commission Expires: 12-17-99


**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHICH
PROCESS MAY BE SERVED**

Pursuant to the provisions of section 607.0501 or 617.0501, Florida Statutes, the following is
submitted in compliance with said act:

That LISA WILLIAMS ASID, P.A., desiring to organize under the laws of the State of Florida
with its principal office, as indicated in the Articles of Incorporation, in the County of COLLIER,
State of Florida, has named Lisa Williams , located at 5056 Sand Dollar Lane, Naples, Florida 34103
, County of COLLIER, State of Florida, as its agent to accept service of process within this State.

ACKNOWLEDGEMENT

Having been named as registered agent and to accept service of process for the above stated
corporation, at the place designated in this certificate, I hereby accept the appointment as registered
agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes
relating to proper and complete performance of my duties, and I am familiar with and accept the
obligations of my position as registered agent.


Lisa Williams

4-1-98
Date

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TALLAHASSEE, FLORIDA