# TRANSMITTAL LETTER

98 OCT 28 PM 4: 05

Department of State Division of Corporations P. O. Box 6327

\*\*\*\*\*78.75

Tallahassee, FL 32314	-		-10/28/98- -10/28/98- ****122.5
	Lotsip, Inc.		
SUBJECT:	(Proposed	corporate name - must includ	e suffix)
Enclosed is an original an	d one(1) copy of the articl	es of incorporation and a	check for :
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate	☑\$122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	James E. McGr Name	ady (Printed or typed)	
	224 Datura St	reet, # 1001	
	West Palm Bea	Address ch, FL 33401	
	Cit	y, State & Zip	·
-	561-820-8937		· ·
	Daytime	: Telephone number	

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

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

Lotsip, Inc.



#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

224 Datura Street, #1001 West Palm Beach, FL 33401

## ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

50

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

James E. McGrady 224 Datura Street, #1001 West Palm Beach, FL 33401

#### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

President
James E. McGrady
7630 Ladson Terrace
Lake Worth, FL 33467

Signature/Incorporator Date

(An additional article must be added if an effective date is requested.)

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 the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered-Agent Date