TRANSMITTAL LETTER

Department of State Division of Corporat P. O. Box 6327 Tallahassee, FL 323	14 LISA Moscher, In	o o 5 /	TATE LATER ALOSINE	FILED 1: 26
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Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			1
\$70.00	△ \$78.75	□ \$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	İ
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	i		Status	
	ĺ	ADDITIONAL COR	PY REQUIRED	
FROM:	LISA Moscher			
Name (Printed or typed)				
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IIII BRICKELL Boy DR #611				
Address				
MIAMI FL 33131				
City, State & Zip				
(a - 1) u a a a				
(305) 446-4088 Daytime Telephone number				
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		8 MIN. FEB.	1999	
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NOTE: Please provide the original and one copy of the articles.

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AR™CLES 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.

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

LISA Moscher, INC

ARTICLE II PRINCIPAL OFFICE

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

2801 FLORIDA AVENUE COCONUT GROVE, FL 33133

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

LISA MOSCHER 1111 BRICKELL BAY DRIVE #611

ARTICLE V INCORPORATOR

MIAMI FL 33131

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

LISA MOSCHER

IIII BRICKELL BOY DRIVE #611

MIAMI FL 33131

5/11/9

Jan January

Date

Signature/Incorporator & REGISTERED AGENT

(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

SEE SIGNATURE ABOVE

5-11-99