

PO2000118659

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

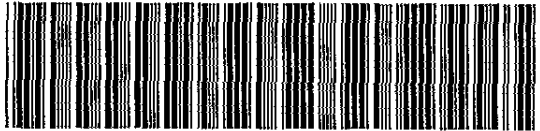
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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FILED
02 NOV -4 PM 3:39
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Department of State
P.O. Box 6327
Division of Corporations
Tallahassee, Florida 32314

Re: CDO ENTERPRISES, INC.
201 PARK PLACE, SUITE 314
ALTAMONTE SPRINGS, FLORIDA 32701

Dear Department of State:

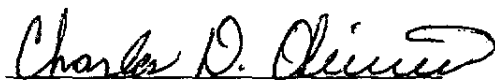
I am enclosing an original and one copy of the Articles of Incorporation for the above-proposed corporation. [I reserved the above corporate name with your office pursuant to reservation #] _____, dated 10/31/2002.

Also enclosed is check/ money order in the amount of \$ 122.50 for payment of the following fees:

Filing Fee	\$ 35.00
Certified copy fee	<u>52.50</u>
Registered Agent fee	<u>35.00</u>
Charter Tax	<u>00.00</u>
 TOTAL	 122.50

Please file the original articles and return the certified copy to me at the above address:

Sincerely


Incorporator
CHARLES OLIVER

ARTICLES OF INCORPORATION
OF
CDO ENTERPRISES, INC.

02 NOV -4 PM 3:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

- ONE: The name of the corporation is CDO ENTERPRISES, INC.
- TWO: The duration of the corporation shall be perpetual.
- THREE: The address of the corporation is 201 PARK PLACE, SUITE 314
ALTAMONTE SPRINGS, FL 32701
- FOUR: The general purpose or purposes for which this corporation is being formed are to operate a Graphic Design, Screen Printing, Brochures, Publications, Illustrations, T-shirts and any other lawful business activity for which corporation may be incorporated under Chapter 607 of the Florida Statutes.
- FIVE: **The aggregate number of shares, which the corporation shall have authority to issue is:**
- One Thousand (1,000) common shares
having a value of \$1.00 per share.
- SIX: The registered agent and the street address of the initial registered office of the corporation in the state of Florida is:

Name


CHARLES OLIVER

Address

201 PARK PLACE, SUITE 314
ALTAMONTE SPRINGS, FL 32701

SEVEN: The number of directors constituting the initial board of directors is 1 and the name and address of each person who is to serve as a member thereof is as follows:

Name	Address
<u>CHARLES OLIVER</u>	<u>201 PARK PLACE, SUITE 314</u> <u>ALTAMONTE SPRINGS, FL 32701</u>

EIGHT: The name and address of the sole incorporator is:

Name	Address
<u>CHARLES OLIVER</u>	<u>201 PARK PLACE, SUITE 314</u> <u>ALTAMONTE SPRINGS, FL 32701</u>

IN WITNESS WHEREOF, the undersigned, as sole incorporator of this corporation has executed these articles of Incorporation.

DATED: 11/1/02


CHARLES OLIVER

The internal affairs of the corporation shall be governed by the By- Laws of the corporation, which shall be adopted at first meeting of the board of directors.

ARTICLE NINE (1X):

SUBSCRIBERS

The names and street addresses and the number of shares subscribed to by the subscribers hereto, who are also members of the first Board of Directors and who are to conduct the Business of the Corporation until those elected at the organizational meeting, are:

CHARLES OLIVER -PRESIDENT	1000 Shares
201 PARK PLACE, SUITE 314	
ALTAMONTE SPGS., 32701	

STATE OF FLORIDA

COUNTY OF SEMINOLE

I, HEREBY CERTIFY that on this day, before me, a Notary Public authorized in the state and county named above to take acknowledgments, personally appeared to me known to be the person described CHARLES OLIVER as the subscriber in and who executed the foregoing Articles of Incorporation, and acknowledged before me that he/ she subscribed to those Articles of Incorporation.

WITNESS my hand and official seal in the County and State named above this

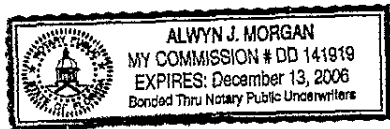
10/1/02 day of NOVEMBER, 2002.

Alwyn J. Morgan

Notary Public

My commission expires: 12/13/2006

I, the undersigned, hereby accept the appointment as Registered Agent of the above noted corporation. I am familiar with, and accept the obligations of, Section 607.325 of the Florida Statutes.



Charles D. Oliver
DR. 0416-144
TALLAHASSEE FLORIDA
SECRETARY OF STATE
02 NOV - 10 PM 3:40
FILED