P0700021845

| (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) | • |
|---|---|
| (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) | (Requestor's Name) |
| (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) | (Address) |
| PICK-UP WAIT MAIL (Business Entity Name) | (Address) |
| PICK-UP WAIT MAIL (Business Entity Name) | (CitylChata (Zin (Dhana dh |
| (Business Entity Name) | (City/State/Zip/Phone #) |
| | PICK-UP WAIT MAIL |
| | (Business Entity Name) |
| (Document Number) | (Comisso Limity Comiss) |
| | (Document Number) |
| Certified Copies Certificates of Status | Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: | Special Instructions to Filing Officer: |
| | |
| | |
| | |
| | , |

Office Use Only



400088210804

02/16/07--01019--006 **70.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

07 FEB 16 AMII: 1

APPROVED FILED

COVER LETTER

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

| SUBJECT: CALM SALES INC | | |
|--|----------------------------|---------------------------------|
| (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| | • | |
| | | |
| Enclosed are an original and one (1) copy of the artic | cles of incorporation and | d a check for: |
| [| | D 607.50 |
| ✓ \$70.00 □ \$78.75 | □ \$78.75 | □ \$87.50 |
| Filing Fee Filing Fee | Filing Fee | Filing Fee, |
| & Certificate of Status | & Certified Copy | Certified Copy & Certificate of |
| | İ | |
| | ADDITIONAL CO | Status |
| | ADDITIONAL CO | Pri KEQUIKED |
| EDWARD ELAYMAN | · | |
| FROM: EDWARD FLAXMAN | (Printed or typed) | |
| name (| (Finited of Typed) | |
| 226 SW LANGFIELD | AVE | |
| A | Address | |
| PORT ST LUCIE, FL. 3 | | |
| City, | State & Zip | |
| 772-878-0386 | | |
| Daytime Te | elephone number | |

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

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:

CAL SALES INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6641 RIVERMILL CLUB DR LAKE WORTH, FL. 33463-7418

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

CHRISTOPHER SHAY 6641 RIVERMILL CLUB DR LAKE WORTH, FL. 33463-7428

ARTICLE VI REGISTERED AGENT

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

EDWARD FLAXMAN 226 SW LANGFIELD AVE PORT ST LUCIE, FL. 34984-4925

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

EDWARD FLAXMAN 226 SW LANGFIELD AVE PORT ST LUCIE, FL. 34984-4925

| ************ | ********** |
|---|-----------------|
| Having been named as registered agent to accept service of process for certificate, Lam familiar with and accept the appointment as registered of | |
| Elleral Flan | 7/13/07 |
| Signature/Registered Agent | 7 Pate 7 13 107 |
| Signature/Incorporator | Date |

SECRETARY OF STATE