

# P96000007931

## CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904) 224-8870  
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

*BH 1/25/96*

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE	1/25		
TIME	2:00		CK No. _____
BY	NC		

WALK-IN \_\_\_\_\_  
 Will Pick Up \_\_\_\_\_

RE: Louis Commonwealth Bank, Inc.

96 JAN 25 PM 1:11  
 O.C. FEE. DISBURSED

TALLAHASSEE, FLORIDA

<input checked="" type="checkbox"/>	Capital Express™	
<input checked="" type="checkbox"/>	Art. of Inc. File	
<input type="checkbox"/>	Corp. Record Search	
<input type="checkbox"/>	Ltd. Partnership File	
<input type="checkbox"/>	Foreign Corp. File	
<input checked="" type="checkbox"/>	( ) Cert. Copy(s)	
<input checked="" type="checkbox"/>	Art. of Amend. File	
<input type="checkbox"/>	Dissolution/Withdrawal	
<input type="checkbox"/>	C U S -	
<input type="checkbox"/>	Fictitious Name File	
<input type="checkbox"/>	Name Reservation	
<input type="checkbox"/>	Annual Report/Reinstatement	
<input type="checkbox"/>	Reg. Agent Service	
<input type="checkbox"/>	Document Filing	
<input type="checkbox"/>	Corporate Kit	
<input type="checkbox"/>	Vehicle Search	
<input type="checkbox"/>	Driving Record	
<input type="checkbox"/>	Document Retrieval	
<input type="checkbox"/>	UCC 1 or 3 File	
<input type="checkbox"/>	UCC 11 Search	
<input type="checkbox"/>	UCC 11 Retrieval	
<input type="checkbox"/>	File No.'s, Copies	
<input type="checkbox"/>	Courier Service	
<input type="checkbox"/>	Shipping/Handling	
<input type="checkbox"/>	Phone ( )	
<input type="checkbox"/>	Top Priority	
<input type="checkbox"/>	Express Mail Prep.	
<input type="checkbox"/>	FAX ( ) pgs.	

### SUBTOTALS

FEE.....	
DISBURSED.....	
SURCHARGE.....	
TAX on corporate supplies.....	
SUBTOTAL.....	
PREPAID.....	
BALANCE DUE.....	

96 JAN 25 PM 1:11  
 RECEIVED  
 Division of Corporations

Please remit invoice number with payment  
 TERMS: NET 10 DAYS FROM INVOICE DATE  
 1 1/2% per month on Past Due Amounts  
 Past 30 Days, 18% per Annum.

THANK YOU  
 from  
 Your Capital Connection

**ARTICLES OF INCORPORATION**

**OF**

**LOUIS COMMUNICATIONS, INC.**

**FILED**  
96 JAN 25 PM 1:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 is **LOUIS COMMUNICATIONS, INC.**

**ARTICLE II: PRINCIPAL OFFICE**

The principal place of business and mailing address of the corporation is 235 No. University Drive, Pembroke Pines, Florida 33024.

**ARTICLE III: CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred fifty (150) shares having a par value of (.01) per share.

#### **ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is Ron Schmidt, Esq., 235 No. University Drive, Pembroke Pines, Florida 33024.

#### **ARTICLE V: INCORPORATOR**

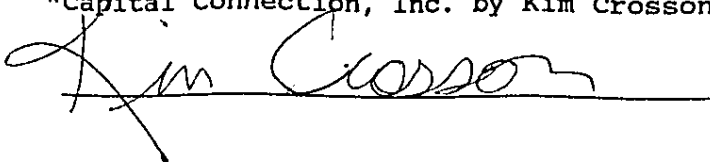
The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

#### **ARTICLE VI: INITIAL BOARD OF DIRECTORS**

The name and address of the initial Board of Directors of the corporation is DIRECTOR, LOU SITARIS, 235 No. University Drive, Pembroke Pines, FL 33024.

The undersigned has executed these Articles of Incorporation this 25th day of January 1996.

"Capital Connection, Inc. by Kim Crosson, Client Representative"

A handwritten signature in cursive script, reading "Kim Crosson", is written over a horizontal line.

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

FILED  
96 JAN 25 PM 1:14  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

LOUIS COMMUNICATIONS, INC.

2. The name and address of the registered agent and office is:

Ron Schmidt, Esq.

235 No. University Drive

Pembroke Pines, Florida 33024

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 DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

  
Ron Schmidt, Esq.