

795000001383

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 \$ _____

95 MAR 22 PM 2:23
 FAX 224-8870

APR 3/22/95

REQUEST TAKEN CONFIRMED APPROVED
 DATE _____
 TIME _____ CK No. _____
 BY SW _____

WALK-IN Will Pick Up 3:20 11:00

RE: Disabled Veterans Emergency Aid
Mission, Inc

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

500001436605
 -03/22/95--01059--014
 ***122.50 ***122.50

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

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, 19% per Annum.

THANK YOU
 from
 Your Capital Connection

FILED
95 MAR 22 PM 5 10

ARTICLES OF INCORPORATION

FOR

DISABLED VETERANS EMERGLNCY AID MISSION, INC.

The undersigned, acting as incorporator of a corporation pursuant to chapter 617, Florida Statutes, adopts the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be: DISABLED VETERANS EMERGENCY AID MISSION, INC.

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal place of business and the mailing address of this corporation shall be: 311 Corry Road, Pensacola, Florida 32507.

ARTICLE III PURPOSE

The specific purpose for which the corporation is organized is: To provide food, clothing, assistance and financial aid to disabled veterans and their families.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is as follows: Directors will be appointed as provided at the annual organizational meeting of the board of directors.

ARTICLE V LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided in Section 617.0302, Florida Statutes.

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and street address of the initial registered agent is: Nick C. Varazo, 419 South Navy Boulevard, Pensacola, Florida 32507.

ARTICLE VII INCORPORATORS

The name and street address of the incorporator for these Articles of Incorporation is: Nick C. Varazo, 419 South Navy Boulevard, Pensacola, Florida 32507.

ARTICLE VIII INITIAL OFFICERS

The initial officers of this corporation shall be as follows:

Nick C. Varazo - President

Constantine V. Varazo - Vice President

Charlie Varazo - Vice President

The undersigned incorporator has executed these Articles of Incorporation this 01 day of March, 1995

Signature of the Incorporator:

Nick C. Varazo
NICK C. VARAZO

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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 607.0501 or 617.0501, Florida Statutes, the undersigned 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: DISABLED VETERANS EMERGENCY AID MISSION, INC.
2. The name and address of the registered agent is:
Nick C. Varazo
419 S. Navy Boulevard
Pensacola, Florida 32507

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

Nick C. Varazo

DATE

March 21, 1995