DODOOJ3309 TRANSMITTAL LETTER

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

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SUBJECT:	The	Claremont	Holding	Group,	Inc.		
			(Proposed or	orporate nam	e – must include sui	fix)	
Enclosed is ar	origin	al and one(1) c	opy of the ar	ticles of in	corporation and a	a check for:	
☐ \$70.00 Filing Fee		\$78.75 Filing Fee & Certificate of Status		F &(878.75 iling Fee Certified Copy DITIONAL CO	Status Status \$87.50 Filing Fee, Certified C & Certifica Status PY REQUIR	Copy ate of
1	FROM	John Dav	id Bell				
			Nam Tamiami	Trail, Address	••	-	
N. Fort Myers, Fl 33903 City, State & Zip							
		(941) 652-0792 Daytime Telephone number					

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

ARTICLES 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.

ARTICLE I NAME

The name of the corporation shall be:

The Claremont Holding Group, Inc.

<u>ARTICLE II PRINCIPAL OFFICE</u>

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

1051 N. Tamiami Trail, #13, N. Fort Myers, Fl 3390:

<u>ARTICLE III SHARES</u>

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:

John David Bell, 1051 N. Tamiami Trail, #13, N. Fort Myers, Fl 33903

ARTICLE V INCORPORATOR

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

John David Bell, 1051 N. Tamiami Trail, #13, N. Fort Myers, Fl 33903

MODEL 1/3//00
Signature/Incorporator Date

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/Registered Agent

Date

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