# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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C.C.S.B., INC

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	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
<u> </u>	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
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	Officer Search
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# ARTICLES OF INCORPORATION

OF :

#### C. C. S. B., INC.

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LEGALINAY SISSAE
PALLAHASSEE, FLORIDA

# <u>ARTICLE I</u>

#### <u>Name</u>

1.1 The name of the corporation is C. C. S. B., Inc..

#### ARTICLE II

### Filing Date

2.1 This corporation shall have perpetual existence commencing on the date of filing of these Articles of Incorporation with the Department of State of Florida.

# ARTICLE III

# Purposes

- 3.1 To engage in every aspect of business as it is legal under the laws of the State of Florida.
- 3.2 To do everything necessary and proper in accomplishing the purposes herein set forth and to do anything incidental thereto which is not forbidden under the laws of the State of Florida.

#### **ARTICLE IV**

# Capital Stock

4.1 This corporation is authorized to issue Ten Thousand (10,000.00) shares of stock of \$ 1.00 par value common stock.

#### ARTICLE V

# Preemptive Rights

5.1 Should the capital stock be increased at any time, the stockholders at the time of such increase shall be entitled to a pro-rata share of such increase upon payment for the shares at the price at which the shares are offered to others.

#### ARTICLE VI

# Initial Registered Office and Agent

6.1 The street address and mailing address of the initial registered office of this corporation is **Joseph J. Nolan**, and the name of the initial registered agent of this corporation is **1674 Williamsburg Square**, **Lakeland**, **Florida 33803**.

### ARTICLE VII

#### **Directors**

- 7.1 This corporation shall have four (4) director initially.
- 7.2 The number of directors may be increased or decrease from time to time in accordance with the bylaws.
  - 7.3 The name and address of each initial director of this corporation is:

Carolyn Siewert 3621 Central Avenue St. Petersburg, Florida 33713 Barry L. Siewert 3621 Central Avenue St. Petersburg, Florida 33713

Colby Lytle 3621 Central Avenue St. Petersburg, Florida 33713 Susan Lytle 3621 Central Avenue St. Petersburg, Florida 33713

7.4 The principal address of the corporation is:

3621 Central Avenue St. Petersburg, Florida 33713

### <u>ARTICLE VIII</u>

# Incorporator

8.1 The name of the person signing and the principal address and mailing address of the corporation is:

Joseph J. Nolan 1674 Williamsburg Square Lakeland, Florida 33803

# <u>ARTICLE IX</u>

#### <u>Indemnification</u>

9.1 The corporation shall indemnify its officers, directors, and authorized agents for all liabilities incurred directly, indirectly or incidentally to services performed for the corporation, to the fullest extent permitted under Florida law existing now or hereinafter enacted.

#### ARTICLE X

#### **Amendment**

10.1 This corporation reserves the right to amend or repeal any provisions contained in these Articles, or any amendment to them, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation on the 1st day of August, 2000.

oseph). Nolan, Incorporator

STATE OF FLORIDA COUNTY OF POLK

I HEREBY CERTIFY that the foregoing instrument was acknowledged before me by Joseph J. Nolan, personally and well known to me or who produced a drivers license as identification and who did not take an oath.

SWORN TO AND SUBSCRIBED before me on this 1st day of August, 2000.

My Commission Expires:

(SEAL)

NOTARY PUBLIC

Printed Name: Diane L. Reese



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# CONSENT OF REGISTERED AGENT

Having been named as Registered Agent for Ultimate Interiors and Accessories, Inc., at the registered office designated in the Articles of Incorporation, the undersigned hereby accepts the designation of Registered Agent.

Joseph J. Nolan, Registered Agent

STATE OF FLORIDA COUNTY OF POLK

I HEREBY CERTIFY that the foregoing instrument was acknowledged before me by Joseph J. Nolan, personally and well known to me or who produced a drivers license as identification and who did not take an oath.

SWORN TO AND SUBSCRIBED before me this 1st day of August, 2000.

My Commission Expires:

(SEAL) \_ .

NOTARY PUBLIC

Printed Name: Diane L. Reese

