

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

700003365267--1
-08/21/00--01039--009
*****78.75 *****78.75

SUBJECT: CLP Script, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Southwest Professional Services of Fort Myers, Fl. 33919
Name (Printed or typed)

13571 McGregor Blvd. #22
Address

Fort Myers, Fl. 33919
City, State & Zip

941-481-4444
Daytime Telephone number

FILED
00 AUG 21 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FL 32314

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

8-25
WC

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:

CLP Script, Inc.

ARTICLE II PRINCIPAL OFFICE

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

14500 Lake Olive Drive
Fort Myers, Fl. 33919

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Southwest Professional Services of Fort Myers, Inc.
13571 McGregor Blvd #22
Fort Myers, Fl. 33919

ARTICLE V INCORPORATOR

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

Carol Piccoli
14500 Lake Olive Drive
Fort Myers, Fl. 33919

Carol L. Piccoli

Signature/Incorporator

8/16/00

Date

(An additional article must be added if an effective date is requested.)

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

Southwest Professional Services of Fort Myers, Inc.

Patricia Goldberg

Signature/Registered Agent

8/16/00

Date

Patricia Goldberg

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA