POTERATE FOR 3705

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

SUBJECT:	CVD Fundi			
•	(Proposed corpor	ate name - must include su	ffix)	
	•	60	0000345193 -11/03/000110 *****78.75 ***	3 5 0001 ***78.75
Enclosed is an origina	al and one(1) copy of the articles	of incorporation and a	check for :	
1 \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate	,
		ADDITIONAL CO	PY REQUIRED	
FROM:	Johnne (Name (Pr	one CVD For inted or typed)	inding Inc	-
	5102 L	ongfellow K	he.	^-
	TIAMPY City,	PIA. 3.	3629	-
	813 8 Daytime To	39-4442.	OO NOV	· . :
			RY OF	11.EI

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



ARTICLES OF INCORPORATION OF CVD FUNDING, INC.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

CVD FUNDING, INC.

The principal place of business of this corporation shall be:

5102 Longfellow Tampa, FL 33629

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock at \$1.00 par value.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 6735 S. Lois Avenue, Tampa, Florida 33616, and the name of the initial registered agent of the corporation at that address is Dorotha Thompson.



ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. DIRECTORS

This corporation shall have one director initially. The name and street address of the initial member of the Board of Directors is:

Joanne M. Cone 5102 Longfellow Tampa, FL 33629

ARTICLE VIII. SUBSCRIBER

The name and street address of the subscriber to these Articles of Incorporation is:

Joanne M. Cone 5102 Longfellow Tampa, FL 33629

IN WITNESS WHEREOF, the undersigned has hereunto set her hand and seal on this _____ day of _October ____, 2000.

Joanne M. Cone

ACCEPTANCE OF REGISTERED AGENT DESIGNATED IN ARTICLES OF INCORPORATION

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the foregoing 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 of Registered Agent under Section 6078.0505, Florida Statutes.

10/23/00

Date

Dorotha Thompson

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SECRETARY OF STAFF
SECRETARY OF STAFF