P0000105133

TRANSMITTAL LETTER

Department of State				
Division of Corporation P. O. Box 6327 Tallahassee, FL 3231	-	3	80000345 -11/09/00- *****78.7	-01055004
SUBJECT:		ANCHINI TE NAME - MUST INCL	TNC.	<u> </u>
Tuludia an aginina	l and one(1) copy of the article	es of incomposition and	a check for :	
Enclosed is an origina	I and one(1) copy of the article	es of incorporation and	. Control 101	1
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	Status Pilling Fee, Certified Copy & Certificate of Status COPY REQUIRED	
	11:- 0] ~ = :
FROM:	VICTOR Name (Pr	FRANCHIN rinted or typed)	<u> </u>	SEC Visio
	PO BO	x 624 Address		SECRETARY OF CORP
	BONITA City,	Springs State & Zip	F1 34133	OF STATE RPORATIONS
	305 30 Daytime T	94-0923 elephone number		

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

EFIN# 593679503

(C) 11/13/00

ARTICLES OF INCORPORATION	FILED			
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	SECRETARY OF STATE DIVISION OF CORPORATIONS			
ARTICLE I NAME The name of the corporation shall be:	00 NOV -9 PM 1:45			
VICTOR FRANCHINI INC				
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: PO Box 624 Bonita Springs, F1 34	1133			
ARTICLE III PURPOSE The purpose for which the corporation is organized is:				
TO PERFORM ANY AND ALL LEGAL IN THE STATE OF FLORIDA.	Business			
ARTICLE IV SHARES The number of shares of stock is:				
100 SHARES				
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)				
The name(s) and address(es): VICTOR FRANCHINI				
60 Box 654				
VICTOR FRANCHINI PO BOX 624 BONITA SPRINGS FI ARTICLE VI REGISTERED AGENT	34133			
The name and Florida street address of the registered agent is:				
LESLIE FRANCHINI				
4198 SPRINGS LANE				
4198 SPRINGS LANE BONITA SPRINGS, FI 34	134			
The name and address of the Incorporator is:				
MINTOR FRANCHINI				
4198 SPRINGS LANE				
VICTOR FRANCHINI 4198 SPRINGS LANE ************************************	4134			
Having been named as registered agent to accept service of process for the above stated corpora	tion at the place designated in this			
certificate. I am familiar with and accept the appointment as registered agent and agree to act in	this capacity			
Jas Hauchi	10-1-06			
Signature/Registered Agent	Date			

Signature/Incorporator