P00000116576

TRANSMITTAL LETTER

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

SUBJECT: 1	YUTZNER	HGENCIES	INC
	(proposed corporate	name)	
Enclosed please t	find an original and one (1) co	ony of the articles of incor	noration for the
above corporation	n and check in the amount of	\$ <u>70 -</u>	poradion to the
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FROM:	D. British E		
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	4901 1000	e Coser To	UTZNER EER TRAIL 34677
	Address	E GREEK IR	CMIL
	OLDSMAR	FL. 346	フラ
	City, State, & Zip		Z _S o
	(727) 771-1	027	OO DEC
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Note: Additional copy of articles is needed only when certified copy is requested.

819/93

ARTICLES OF INCORPORATION

<u>OF</u>

KUTZNER PAGENCIES INC

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

I CUTZHER PAGENCIES INC

ARTICLE II PRINCIPAL OFFICE

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

4906 TURTLE CREEK TRAIL OLDSMAR, FL. 34677

DEC 18 AM 8: CRETARY OF STILLAHASSEE, FLOOR

ARTICLE III CAPITAL STOCK

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

1000 @ \$1,00 each.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

WILLIAM B SHOW, FR. C.PA.

18395 GULF BLVD #203.

INDIAN SHORES. FL. 33785

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

PADREW, F. ICUTZNER 4906 TURTLE CREEK TRAIL OLDSMAR. FL. 34677

The undersigned has(have)	executed these Articles of Incorporation this	
day o	OF DECEMBUR \$ 000	
	Mayrow Pres	DENT
	Signature/Title	
	Signature/Title	
	Signature/Title	

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

suant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

	=-		<u> </u>	
e name and address of the regist	tered agent and office is	3:		
NAILLIAM B = (NAME) (NAME) (18395 GULF E) (P.O. BOX NOT	SHAW &	TRA.		
(NAME		SEC	90	
18395 GULF E	SLVD # 2	<u>23. 全部</u>	<u> </u>	
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	SIGNATURE(corp	orate officer)	<u>}</u>	
	SIGNATURE (corp	Dest		
	DATE 12/14			

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.