

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

SUBJECT: CHCIS VEL	ADURANTE Ename- <u>must inclu</u>	<u>#####78.</u> -01/10/01 -01/10/01			
90000 353 1479					
Enclosed is an original and one(1) copy of the articles of incorporation and a check					
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	SEC:	0	
FROM: CHRIS DELADURANTEY Native (Printed or typed) 5350 Sycamore DR Address					
(941) 455-3	L 3411 7			-	

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



ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Pro-	ofit)
ARTICLE I NAME The name of the corporation shall be:	en e
CHRIS DELADURANTEY	INC
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	The state of the s
5350 SYCAMORE DR	NAPLES, FL 34119
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	en e
CONDUCT ANY LEGAL BUSTN	ess in the state or trouda
ARTICLE IV SHARES The number of shares of stock is:	the figure of the first particle of the second seco
\ \\	, o
ARTICLE V INITIAL OFFICERS DIRECTORS (The name(s) and address(es):	(optional)
CHRIS DELADURANTEY 5350 Sycamore DR	
NAPLES, FL 34119	Y 9: L STATE LORIDA
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered ager	ot is:
JOAN DELADURANTEY	
5350 SYCAMORE DR NAPLES, PL 34119	
ARTICLE VII INCORPORATOR	en e
The name and address of the incorporator is JOAN DELADURANTEY 5350 SYCAMORE DR	
	· · · · · · · · · · · · · · · · · · ·
NAPLES, TC 0711	**************************************
**************************************	d agent and agree to act in this capacity
cerajicaie, i um jumina i i i i i i i i i i i i i i i i i i	1=06-01
Our Moderates	Date Date
Signature/Registered Agent	1-08-11
Jan & Goderenting	Date
Signature/Incorporator	

•••