

TRANSMITTAL LETTER

PO1000020334

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

SUBJECT: Paradigm Capital Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

100003672561--1
-02/08/01--01066--003
*****87.50 *****87.50

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 of Status

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Heather Johnson
Name (Printed or typed)

990 West Highway 50
Address

Clermont, FL 34711
City, State & Zip

352-394-0288
Daytime Telephone number

FILED
01 FEB 23 AM 9:25
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

T. SMITH FEB 26 2001
W1 TS
31



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

February 12, 2001

HEATHER JOHNSON
990 W HWY 50
CLERMONT, FL 34711

SUBJECT: PARADIGM CAPITAL INC.
Ref. Number: W01000003261

We have received your document for PARADIGM CAPITAL INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as incorporator in the document and the person signing as incorporator must be the same.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6927.

Tracy Smith
Document Specialist

Letter Number: 001A00008605

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Paradigm Capital Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 990 West Highway 50, Suite 1
Clermont, FL 34711

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to operate in the state of Florida as a holding company.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Don Johnson
990 West Highway 50, Ste 1
Clermont, FL 34711

Heather Johnson
990 West Highway 50, Ste 1
Clermont, FL 34711

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Heather Johnson
990 West Hwy 50, Ste 1
Clermont, FL 34711

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Heather Johnson
990 West Hwy 50, Ste 1
Clermont, FL 34711

Having been named as registered agent to accept service of process for the above stated corporation 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

Signature/Registered Agent

Date

Signature/Incorporator

Date

FILED
01 FEB 23 AM 9:25
SECRETARY OF STATE
TALLAHASSEE FLORIDA