

# **Wallis and Aho, Enrolled Agents**

1776 Lake Worth Road Suite 103 ◆ Lake Worth, Florida 33460 Phone 561-547-9950 ◆ Fax 561-547-6059 ◆ Email wallaho@bellsouth.net

April 2, 2001

Department of State Division of Corporations P O Box 6327 Tallahassee, Florida 32314 600003962776--S -04/06/01--01064--012 \*\*\*\*\*\*70.00 \*\*\*\*\*\*70.00

Gentlemen:

Attached are the Articles of Incorporation and the proper fees.

Please issue a certificate of Incorporation and return it directly to Wallis & Aho, Enrolled Agents at the above address.

Very truly yours,

Barbara Aho

ARTICLES OF INCORPORATION

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WE, THE UNDERSIGNED HEREBY ASSOCIATE OURSELVES
TOGETHER FOR THE PURPOSE OF BECOMING A CORPORATION
UNDER THE LAWS OF THE STATE OF FLORIDA PROVIDING FOR
THE FORMATION, LIABILITY, RIGHTS, PRIVILEGES AND IMMUNITIES
OF CORPORATION FOR PROFIT.

### **ARTICLE I, NAME**

THE NAME OF THE CORPORATION SHALL BE:

### DAVID M. NELSON, INC.

### ARTICLES II, NATURE OF BUSINESS

THIS CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES OF AMERICA AND OF THE STATE OF FLORIDA

#### ARTICLE III, CAPITAL STOCK

THE MAXIMUM NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY TIME IS FIVE HUNDRED(500) SHARES OF COMMON STOCK, OF ONE DOLLAR (\$1.00) PAR VALUE.

### ARTICLE IV, INITIAL CAPITAL

THE AMOUNT OF CAPITAL WITH WHICH THIS CORPORATION WILL BEGIN BUSINESS WILL NOT BE LESS THAN FIVE HUNDRED DOL-LARS(\$500).

### ARTICLE V, TERM OF EXISTENCE

THIS CORPORATION IS TO HAVE PERPETUAL EXISTENCE.

### **ARTICLE VI, ADDRESS**

THE INITIAL ADDRESS IN THE STATE OF FLORIDA OF THE PRINCIPAL OFFICES OF THE CORPORATION SHALL BE:

# 333 WALTON BLVD. #1 WEST PALM BEACH, FL. 33405

THE BOARD OF DIRECTORS MAY FROM TIME TO TIME MOVE THE PRINCIPAL OFFICES OF THE CORPORATION TO ANY OTHER ADDRESS IN FLORIDA.

# ARTICLE VII, INITIAL BOARD OF DIRECTORS

THIS CORPORATION SHALL HAVE ONE DIRECTOR INITIALLY.

THE NUMBER OF DIRECTORS MAY BE EITHER INCREASED OR DIMINISHED BY THE BY-LAWS ADOPTED BY THE SHAREHOLDERS BUT SHALL NEVER BE LESS THAN ONE. THE NAME AND ADDRESS OF THE INITIAL DIRECTOR OF THIS CORPORATION IS:

# DAVID M. NELSON 33 WALTON BLVD. #1 WEST PALM BEACH, FL. 33405

# ARTICLE VIII, INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

# DAVID M. NELSON 333 WALTON BLVD. #1 WEST PALM BEACH, FL. 33405

# **ARTICLE IX, BY-LAWS**

THE POWER TO ADOPT, ALTER, AMEND, OR REPEAL BY-LAWS SHALL BE VESTED IN THE BOARD OF DIRECTORS AND THE SHARE-HOLDERS.

# **ARTICLE X, AMENDMENT**

THIS CORPORATION RESERVES THE RIGHT TO AMEND OR REPEAL ANY PROVISION CONTAINED IN THESE ARTICLES OF INCORPORATION, OR ANY AMENDMENT TO THEM, AND ANY RIGHT CONFERRED UPON THE SHAREHOLDER IS SUBJECT TO THIS RESERVATION.

## **ARTICLE XI, S CORPORATION**

THIS CORPORATION MAY BE AN S CORPORATION AS DEFINED BY THE INTERNAL REVENUE CODE SO THAT PROFITS ARE TAXED DIRECTLY TO THE SHAREHOLDERS ON A PRO RATA BASIS.

ARTICLE XII, REGISTERED AGENT AND REGISTERED OFFICE

IN COMPLIANCE WITH SECTION 607.325, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

THE CORPORATION HAS NAMED DAVID NELSON WHO IS LOCATED AT 333 WALTON BLVD. #1, WEST PALM BEACH AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISION OF ALL STATUTES RELATIVE TO THE PROPER PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATION OF FLORIDA STATUTES.

SIGNED X W W	
REGISTERED AGENT	
DATE	

IN WITNESS WHEREOF, THE UNDERSIGNED, AS SUBSCRIBING INCORPORATOR, HAVE HEREUNTO, SET OUR HANDS AND SEALS THIS DAY OF OUR DOWN FOR THE PURPOSE OF FORMING THIS CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA, AND HEREBY MAKE AND FILE, IN THE OFFICE OF THE SECRETARY OF STATE, FLORIDA, THESE ARTICLES OF INCORPORATION, AND CERTIFY THAT THE FACTS HEREIN STATED ARE TRUE.

)A, AND HEREBY MAKE AND FILE, IN THE OFFICE OF TARY OF STATE, FLORIDA, THESE ARTICLES OF INC I, AND CERTIFY THAT THE FACTS HEREIN STATED A	ORPO-
SWORN TO AND SUBSCRIBED BEFORE ME  WORN TO AND SUBSCRIBED BEFORE ME  THIS DAY OF	Dana Lynn Davis  MY COMMISSION # CC662788 EXPIRE  July 10, 2001  BONDED THRU TROY FAIN INSURANCE, INC.
INCORPORATOR	