

1822 Sharon Road Tallahassee FL 32303 Tel/Fax 850.422.3070 Email hgcastille@aol.com

May 21, 2001

100004334021---4 -05/30/01--01042--001 *****70.00 ******70.00

Department of State Division of Corporations PO Box 6327 Tallahassee FL 32314

To Whom It May Concern:

eliCastille

Please find enclosed a completed Articles of Incorporation (original and a copy) along with my check for \$70.00, date effective upon your receipt.

Please contact me at the above address, phone or email if you have any questions or need additional information to complete this filling. Thank you in advance for your assistance.

Sincerely,

Holly Castille

O1 MAY 30 AM 9: 3
SECRETARY OF STATE
SECRETARY OF STATE

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: FILED The Castille Group, Inc. MAY 30 AM 9: 33 SECRETARY OF STATE ARTICLE II PRINCIPAL OFFICE TALLAHASSEE, FLORIDA The principal place of business/mailing address is: 1822 Sharon Road Tallahassee FL 32303 <u>ARTICLE III</u> **PURPOSE** The purpose for which the corporation is organized is: To engage in any and all lawful business approved by the Board of Directors and which businesses are permitted under the laws of the State of Florida and shall have all powers conferred by the laws of the State of Florida upon business corporations. ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es): President: Holly Castille Vice President: Tim Castille 1822 Sharon Rd 1822 Sharon Rd Tallahassee FL 32303 Tallahassee FL 32302 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Holly Castille 1822 Shovon Rd Tallahassee FL 32303 <u>ARTICLE VII</u> **INCORPORATOR** The name and address of the Incorporator is: Holly Castille 1822 Sharon Rd Tallahassee FL 32303 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

Signature/Incorporator

Signature/Incorporator

Signature/Incorporator

Signature/Incorporator

Signature/Incorporator

Signature/Incorporator



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| Signature/Registered Agent | 5-21-01 |
| Signature/Incorporator | Date |