

TRANSMITTAL LETTER
P018000078437

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

SUBJECT: Sun Settlements, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

700004519637--8
-08/06/01--01107--014
*****87.50 *****87.50

Enclosed are 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: Robert H. DeVore
Name (Printed or typed)

7820 S. Holiday Drive, Suite 220
Address

Sarasota, Florida 34231
City, State & Zip

(941) 923-0061
Daytime Telephone number

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

8-9-01
WCC

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:

Sun Settlements, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7820 S. Holiday Dr., Suite 220
Sarasota, Florida 34231

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any lawful business for which corporations may be organized under the Florida Business Corporation Act. To have all the general powers granted to corporations organized under the Florida Business Corporation Act, whether granted by specific statutory authority or by construction of law.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ARTICLE VI REGISTERED AGENT

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

Robert H. DeVore
7820 S. Holiday Dr., Suite 220
Sarasota, Florida 34231

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert H. DeVore
7820 S. Holiday Dr., Suite 220
Sarasota, Florida 34231

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

Robert H. DeVore
Signature/Registered Agent

08/02/01
Date

Robert H. DeVore
Signature/Incorporator

08/02/01
Date

FILED
01 AUG-06 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA