# POLOGOOS 342

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

SUBJECT: Arch Tops Inc.

700004539837--C -08/17/01--01036--009 \*\*\*\*\*87.50 \*\*\*\*\*87.50

	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	DE SUFFIX)		
				करक प्रकार	•-
Enclosed are an orig	inal and one (1) copy of the arti	icles of incorporation and	l a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	Filing Fee, Certified C & Certifica Status PY REQUIR	Copy ate of	
FROM:	Ted A. Morse  Name (Printed or typed)				
	3055 55th Terrace SW				
	Address			OI AI	
	Naples FL 34116			ECRETAGE LAHASS	
•	City, State & Zip			NY OF S	
	(941) 354-0315  Daytime Telephone number			STATE FLORIDA	. <u> </u>

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

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# 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:

Arch Tops Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3055 55th Terrace S.W., Naples, FL 34116

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Starting new business.

### ARTICLE IV SHARES

The number of shares of stock is:

100 shares at no par value

# ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Ted A. Morse 3055 55th Terrace S.W. Naples, FL 34116 (President Nancy L. Morse 3055 55th Terrace S.W. Naples, FL 34116 (Vice-President) Brian M. Morse 3000 55th Terrace S.W. Naples, FL 34116 (Secretary/Treas)

ARTICLE VI REGISTERED AGENT

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

Ted A. Morse 3055 55th Terrace S.W. Naples, FL 34116

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Ted A. Morse 3055 55th Terrace S.W. Naples, FL 34116

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

OI AUG 17 PH 1:31
SECRETARY OF STATE
SECRETARY OF STATE