Division of Corporations



## Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 <u>:</u> (305)599-0839 Phone

Fax Number ÷. (305)716-0346

## FLORIDA PROFIT CORPORATION OR P.A.

CHAGNON MANAGEMENT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
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# ARTICLES OF INCORPORATION FOR CHAGNON MANAGEMENT, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Fiorida Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE

The name of the corporation shall be: CHAGNON MANAGEMENT, INC.

#### ARTICLE

The principal place of business and mailing address of this corporation shall be: 112 N.W. 67<sup>th</sup> STREET, FORT LAUDERDALE, FLORIDA 33309 (TEL 954-492-0040)

#### ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000 Shares

#### **ARTICLE IV**

The name and address of the initial Registered Agent is:

J. LESLIE WIESEN 20211 N.E. 10th PLACE MIAMI, FLORIDA 33179

#### <u>ARTICLE V</u>

The name & street address of the incorporators to these Articles of Incorporation are:

# SECRETARY OF STATE STATE OF CORPORATIONS OF CORPORATIONS

#### SYLVAIN CHAGNON 112 N.W. 67<sup>th</sup> STREET FORT LAUDERDALE, FLORIDA 33309

The	undersigned	incorporator	has	executed	these	Articles	٥f	Incorporation	+hin	eħ		
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By: SYLVAIN CHAGNON

Prepared By: J. Leslie Wiesen - 20211 N.E. 10th Place, Miami, Fl 33179 (Tel # 305-653-2332 & Fax # 305-653-2334) c/worth/scorps/Chagnon Management -- Corp.

#### H01000112172 1

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/ REGISTERED OFFICE, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is: CHAGNON MANAGEMENT, INC.
- 2. The name and address of the Registered Agent and office is:

#### J. LESLIE WIESEN 20211 N.E. 10TH PLACE MIAMI, FLORIDA 33179

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

#### J. LESLIE WIESEN

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