

# TRANSMITTAL LETTER

**P01000122413**

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

APPROVED  
AND  
FILED  
01 DEC 31 PM 1:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: UPLIFT ASSOCIATES INCORPORATED  
(Proposed corporate name - must include suffix)

200004745322--8  
-12/31/01--01068--010  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

EFFECTIVE DATE  
01-01-02

☐ \$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: MELISSA VANGUNDA  
Name (Printed or typed)

PO. Box 180454  
Address

TALLAHASSEE, FL 32318  
City, State & Zip

850-562-5865  
Daytime Telephone number

RECEIVED  
01 DEC 31 PM 1:41  
DIVISION OF CORPORATION

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

*[Signature]*  
12/31  
w

**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:

UPLIFT ASSOCIATES INCORPORATED

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

3134 S. FULMER CIR  
TALLAHASSEE, FL 32303

P.O. Box 180454  
TALLAHASSEE, FL  
32318

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

This Corporation is organized for the purpose of transacting any or all business now or hereafter permitted under the laws of the United States and Florida.

**ARTICLE IV SHARES**

The number of shares of stock is: 1

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

N/A

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLE VI REGISTERED AGENT**

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

Melissa VanGunda  
3134 S. Fulmer Cir  
TALLAHASSEE, FL 32303

ARTICLE VIII EFFECTIVE  
DATE SHALL BE

1/1/02

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Melissa VanGunda  
P.O. Box 180454  
Tallahassee, FL 32318

\*\*\*\*\*

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

Melissa VanGunda  
Signature/Registered Agent

31 Dec 01  
Date

Melissa VanGunda  
Signature/Incorporator

31 Dec 01  
Date