## Description of State

I partment of State ivision of Corporations P. O. Box 6327 Tallahassee, FL 32314

900005112579--0 -03/18/02--01044--004 \*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT: CRYSTAL COVE MANAGEMENT, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

□ \$70.00

**⊠**\$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:	REGINALD SANSARICO  Name (Printed or typed)
<u></u>	Name (Printed or typed)
	10515 PLAINVIEW CIRLE
-	Address

BOCA RATON FL City, State & Zip

33498

56/- 789-89/ Daytime Telephone number

XI

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

## 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: CRYSTAL COVE MANAGEMENT, PRINCIPAL OFFICE The principal place of business/mailing address is: 10515 PLAINVIEW CIRCLE BOCA RATON, FL 33498 PALM BEACH, COUNTY **PURPOSE** The purpose for which the corporation is organized is: ADMINISTRATIVE SERVICES **SHARES** 1,000 (ONE THOUSAND) SHARES The number of shares of stock is: 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: REGINALD SANSARICA 10515 PLAINVIEW CIRCLE BOCARATON, FL 33498 **INCORPORATOR** The name and address of the Incorporator is: REGINALD SANSARICA 10515 PLAINVIEW CIRCLE Bock 24TON FL 33498 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 3-14-02

Signature/Registered Agef