# P02000044310 TRANSMITTAL LETTER

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

SUBJECT: Xtreme Visions, Inc.  (Proposed corporate name - must in		3000052931539 -04/18/0201060005 ******70.00 ******70.00	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	Filing Fee Filing & Certified Copy Certified	ed Copy, tificate of
FROM:	Nañov A. Potor		
PROIVI	Name (Printed or Typed)  5715 Dove Drive  Address		SECRETARY OF STA ALLAHASSEE FLOR 02 APR 18 AM 7:
	New Port Richey, Fl City, State & Zip (727) 815-322	p	STATE LORIDA

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

Daytime Telephone Number

BR 4-24

#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

Xtreme Visions, Inc.

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#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5715 Dove Drive New Port Richey, FL 34652

#### ARTICLE III SHARES

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

10,000 Shares Authorized

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Nancy Peterson 5715 Dove Drive New Port Richey, FL 34652

**FILING FEE: \$70.00** 

### ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Valerie L. Lundin – President, Treasurer 14120 Arbor Hills Road <u>Tampa</u>, FL 33625

Nancy A. Peterson-Vice President, Secretary 5715 Dove Drive
<a href="New Port Richey">New Port Richey</a>, FL 34652

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

15th day of APRIC , 2002.

Walene Signature

Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an Incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

1. The name of the corporation is: Xtreme Visions, Inc.

SECRETARY OF STATE A SECRETARY OF STATE ORIDA TALLAHASSEE, FLORIDA OZ APR 18 MM 7: 38

2. The name and address of the registered agent and office is:

Nancy A. Peterson 5715 Dove Drive New Port Richey, FL 34652

Having been named registered agent and to accept service of the 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.

Jana Setesaco

(DATE)