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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
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D2 NOV 25 AN IO. 25 SECRETARY OF STATE SECRETARY OF STATE

TRANSMITTAL LETTER

Department of State			
Division of Corporat	ions –		
P. O. Box 6327			
Tallahassee, FL 323	14		
cup ip op.	Tal Ensagni	iak Maaa	and Inc
SUBJECT:	PROPOSED CORPORA	TE NAME - MUST INCLU	DE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00	□ \$78.75	\$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
		-	& Certificate of
		ADDITIONAL CO	Status PV REQUIRED
			TREQUIRED
ED 014	Cathanna	God	
FROM:	Catherine Name	(Printed or typed)	
			4. De. 4
	1008 612	Address #	20/
	NAPLES	FC 39102 , State & Zip	· .
	City	, State & Zip	
	239-43	5-7336	
	Daytime	7336 Telephone number	,

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

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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:

Jan Forszpaniak Management, Inc.

ARTICLE II PRINCIPAL OFFICE

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

730 Goodlette Road, Suite 204 Naples, Florida 34102

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time Is 1000 shares.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Catherine M. Fosth, CPA

1008 Goodlette Road, Suite 201

Naples, Florida 34102

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):

Catherine M. Fosth 1008 Goodlette Road, Suite 201 Naples, Florida 34102

The undersigned incorp	orator(s) has(have) executed these Articles of Incorporation t	his	
200 day of _	November, 20 02.		
	Am 60		
_	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 corporat	ion is: Jan Forszpaniak Management, Inc.	
2.	The name and address of	the registered agent and officer is:	
	Catherine M. Fosth, CPA		FILE 02 NOV 25 SECRETAR TALLAHASS
		(Name)	
		1008 Goodlette Road, Suite 201	<u></u>
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	AHIO: OF ST E, FLC
		Naples, Florida 34102	₩ ~ ~
		(CITY/STATE/ZIP)	— iba

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.

(SIGNATURE) //-30-2002 (DATE)