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03 MAR -3 PM 1: 16

TRANSMITTAL LETTER

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

SUBJECT: <u>Cape Liguidation</u> (PROPOSED CORPORATE	S COA NAME – MUST INCLUDE	E SUFFIX)
Enclosed is an original and one(1) copy of the articl	es of incorporation and a	check for:
☐ \$70.00 ☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED

Dune Balsfey
Name (Printed of typed)

3725 SF 4Th Ave.

Address

Caye Coval Fla. 33904

City, State & Zip

(239) 542-0651

Daytime Telephone number

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)	FUED
ARTICLE I NAME	-03 MAR -3 PM 1:16
The name of the corporation shall be:	DECHE LARY OF STATE
Cape Liquidations co.	TALLAHASSEE. FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is: 3725 SE 474 Ave.	
Cape Coval, Fla. 33904	•
ARTICLE III PURPOSE The purpose for which the corporation is organized is: To provide Liquida Tion Services	-
is proofee affaction services	
ARTICLE IV SHARES	
The number of shares of stock is:	
one	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s), address(es) and title(s):	
Duane Balsley, President	
3725 SE 4Th Ave.	
Cape Coval, Fla. 33904	
ARTICLE VI REGISTERED AGENT	•= .
The name and Florida street address of the registered agent is:	
Duane Balsley	
3725 SE 47h Ave.	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
1) Wone Balsley	
Duone Balsley 3725 SE 4th Ave.	
3725 SE 4th Ave.	**********
. /	
3725 SE 4th Aue. ***********************************	o act in this capacity
3725 SE 4th Aue. ***********************************	