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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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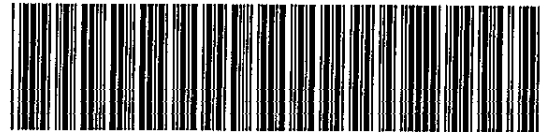
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
ALABAMA

✓

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## TRANSMITTAL LETTER

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

SUBJECT: HOLLIE D. BROOKS ENTERPRISES, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Southwest Professional Services of South Florida, Inc.  
Name (Printed or typed)

13571 McGregor Blvd. #22  
Address

Fort Myers FL 33919  
City, State & Zip

239-481-4444  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

**OF**

**HOLLIE D. BROOKS ENTERPRISES, INC.  
A Florida Profit Corporation**

(Pursuant to Chapter 607 and/or 621, Florida Statutes)

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03 MAY 30 PM 5:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned person has signed this document for the purpose of forming a corporation under the laws of Florida and adopts the following Articles of Incorporation.

1. **Name.** The name of this corporation is HOLLIE D. BROOKS ENTERPRISES, INC..
2. **Purpose and Powers.** This corporation is organized for the transaction of any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as they may be amended from time to time.

This corporation shall have the broad general powers set forth in Chapter 607.0302, Florida Statutes, and the purpose for which this corporation is organized is:

3. **Authorized Shares.** The corporation shall have the authority to issue 1000 shares of common stock.
4. **Principal Office and Mailing Address of Corporation.** The principal place of business and mailing address of the corporation shall be:

Principal Place of Business  
4090 COCONUT CIRCLE SO.  
NAPLES FL 34104

Mailing Address  
4090 COCONUT CIRCLE SO.  
NAPLES FL 34104

5. **Initial Officers/Directors.** The initial Board of Directors shall consist of 1 persons, who shall serve until the first annual meeting of the shareholders, and whose names and addresses are:

HOLLIE D. BROOKS  
4090 COCONUT CIRCLE SO.  
NAPLES FL 34104  
PRESIDENT

6. **Registered Agent.**

The name and Florida street address of the Registered Agent of the Corporation is:

SOUTHWEST PROFESSIONAL SERVICES OF SO. FL, INC.  
13571 MCGREGOR BLVD #22  
FORT MYERS FL 33919

7. **Incorporator.** The name and address of the incorporator is:

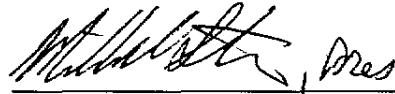
SOUTHWEST PROFESSIONAL SERVICES OF SO. FL, INC.  
MITCHELL STOVING, PRESIDENT  
13571 MCGREGOR BLVD #22  
FORT MYERS FL 33919

FILED  
03 MAY 30 PM 5:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8. **Effective Date.** These Articles are to be effective the date of filing unless otherwise specified below:

IN WITNESS WHEREOF, the following incorporator has signed these Articles of Incorporation on:

Date: 5/27/03

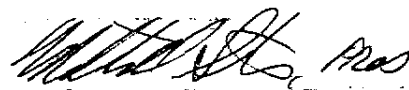


SOUTHWEST PROFESSIONAL SERVICES OF SO. FL, INC.

**ACCEPTANCE BY REGISTERED AGENT**

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.

DATE: 5/27/03



SOUTHWEST PROFESSIONAL SERVICES OF SO. FL, INC.