

PO3000080894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

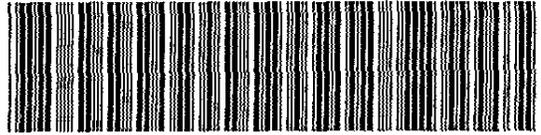
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/07/03--01034--007 **78.75

03 JUL 23 PM 4:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

TRANSMITTAL LETTER

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

SUBJECT: Swift Development Co.
(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
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Kenneth Mandes
Name (Printed or typed)

659 Mckinley Ct.
Address

Kissimmee , Fl. 34758
City, State & Zip

(845) 656-5264
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

03 JUL 23 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 14, 2003

KENNETH MANDES
659 MCKINLEY COURT
KISSIMMEE, FL 34758

SUBJECT: SWIFT DEVELOPMENT CO.
Ref. Number: W03000019876

We have received your document for SWIFT DEVELOPMENT CO. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Document Specialist
New Filings Section

Letter Number: 503A00041392

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be:

Swift Development Co.

03 JUL 23 PM 4: 02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

659 Mckinley Ct. Kissimmee , Fl. 34758

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Urban Development

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Kenneth Mandes 659 mckinley Ct. Kissimmee , Fl. 34758 (President)

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Kenneth Mandes 659 Mckinley Ct. Kissimmee, Fl. 34758

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kenneth Mandes 659 Mckinley Ct. Kissimmee, Fl. 34758

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

Kenneth Mandes
Signature/Registered Agent

7/3/03
Date

Kenneth Mandes
Signature/Incorporator

7/3/03
Date