

PO3000144083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

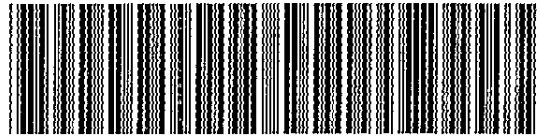
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

me12:

**TRANSMITTAL LETTER**

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

**SUBJECT: TROPICALIA, INC.**  
(proposed corporate name must include suffix)

**Enclosed is an original and (1) copy of the articles of incorporation and a check for:**

☐ **\$70.00**  
**Filing Fee**

☐ **\$78.75**  
**Filing Fee  
& Certificate**

☒ **\$78.75**  
**Filing Fee  
& Certified  
Copy**

☐ **\$87.50**  
**Filing Fee,  
Certified Copy &  
Certificate**

**ADDITIONAL COPY REQUIRED**

**J. DAVID CAMPBELL**

Name printed or typed

**2805 TAMIANI TRAIL**

Street Address

**PUNTA GORDA, FL 33950**

City, State, and Zip Code

**941-639-0680**

Daytime Telephone Number

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**

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

**ARTICLE I      NAME**

The name of the corporation shall be:

**TROPICALIA, INC.**

**ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailling address is:

**201 W MARLIN AVE 102  
PUNTA GORDA, FL 33950**

**ARTICLE III      SHARES**

The number of shares of stock is:

**100 SHARES**

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

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

**J. DAVID CAMPBELL  
2805 TAMiami TRAIL  
PUNTA GORDA, FL 33950**

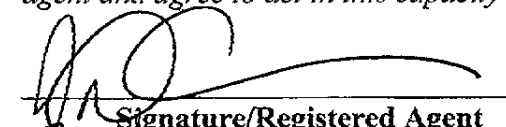
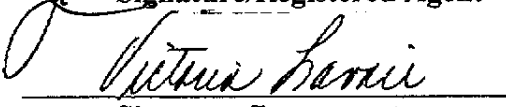
**ARTICLE V      INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:

**VICTORIA LAVOIE  
201 W MARLIN AVE 102  
PUNTA GORDA, FL 33950**

\*\*\*\*\*

*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*

  
\_\_\_\_\_  
Signature/Registered Agent  
  
\_\_\_\_\_  
Signature/Incorporator

11/18/03  
Date  
11/18/03  
Date