## P03000147251

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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DIVISION OF CORPERATIONS

03 DEC -3 PH 1: LO



## TRANSMITTAL LETTER

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

SUBJECT:	PROPOSED COR	exture	ИC		
	(PROPOSED COR	PORATE NAMI	e – <u>Must Incl.</u> i	IDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of th	ne articles of in	corporation and	a check for:	
			· · · · · · · · · · · · · · · · · · ·		
\$70.00	<b>12</b> \$78.75		78.75	<b>□</b> \$87.50	
Filing Fee	Filing Fee & Certificate of Status		g Fee ertified Copy	Filing Fee,	
	& Certificate of Status	a c	rinied Copy	Certified Copy & Certificate of	
				Status	
		ADD	OITIONAL CO	PY REQUIRED	
	1				
FROM:	- Thomas C	Name (Printed or	typed)		
10 -					
40. Vox 740968					
Address					
Drange City & 32174					
-	Drange C	City, State & Zi	p		
•					
1-401-341-6626 Partime Felenbare 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)
The name of the corporation shall be:  Cat play Taxture In
The principal place of business/mailing address is:  Orlange City, Ft. 32774
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:
May and all lawful buriness
The number of shares of stock is: 100 Shares of 40,000 Pope value Penshare
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):
Thomas C France
Thomas C. Franza P.v. Dix 140968
78: 1901 GE
ARTICLE VI REGISTERED AGENT ORINGE City, FL 32774
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:  La ren L Pillings
Repen L Pillings  2019 Temple Temple Temple 33764  ARTICLE VII INCORPORATOR CLEARWISER, Fr. 33764
2019 Temple Temp
ARTICLE VII INCORPORATOR Clearwiter, to 33764
The name and address of the Incorporator is:
The name and address of the Incorporator is: Thomas C. Manza  P.o. Box 140968
p. 0. 00¢ 140100
**************************************
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
125
Signature/Registered Agent Date
Signature/Incorporator
Signature/Incorporator THOMAS (. I-RANLA
1 Marrias C.