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# TRANSMITTAL LETTER

Department of State Division of Corpora P. O. Box 6327 Tallahassee, FL 32	ations			**	
SUBJECT: CHA	ARLIE CUMMINGS, INC (PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an ori	ginal and one (1) copy of the artic	les of incorporation and	a check for:		
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED		
FROM:	Charlie Cummings				
	Name (Printed or typed)				
	873 Samms Avenue				
	Address  Port Orange, Florida 32129  City, State & Zip				
	386-451-1831				
	Douting To	Janhana numbar	<del></del>	• •	

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)

FILED

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TALLAHASSEE, FLORIDA

### ARTICLE I NAME

The name of the corporation shall be:

CHARLIE CUMMINGS, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 873 SAMMS AVENUE PORT ORANGE, FL 32129

### ARTICLE III *PURPOSE*

The purpose for which the corporation is organized is:

TO ENGAGE IN ANY AND ALL LAWFUL BUSINESS FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER THE LAWS OF FLORIDA.

### ARTICLE IV SHARES

The number of shares of stock is:

THIS CORPORATION IS AUTHORIZED TO ISSUE 100 SHARES OF COMMON STOCK HAVING NO PAR VALUE.

### INITIAL OFFICERS AND/OR DIRECTORS ARTICLE V

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

CHARLES R. CUMMINGS, DIRECTOR 873 SAMMS AVENUE PORT ORANGE, FL 32129

JANET JEWELL, DIRECTOR 873 SAMMS AVENUE PORT ORANGE, FL 32129

### ARTICLE VI REGISTERED AGENT

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

CHARLES R. CUMMINGS 873 SAMMS AVENUE PORT ORANGE, FL 32129

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CHARLES R. CUMMINGS 873 SAMMS AVENUE PORT ORANGE, FL 32129

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

MAR 11

Date

Signature/Incorporator

Date