P04000046/45

(F	Requestor's Name)
(A	Address)
(A	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(E	Document Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
	,
	Office Use Only
/	/ X 1



900030003709

00,000,004 -01016--012 **78.75

TILLU 2001 MAR -8 P 2: 51 SECRETARY OF STATE

TRANSMITTAL LETTER

Department of State
Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

SUBJECT:	enfauDan (Incorporat	ed	
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCLU</u>	UDE SUFFIX)	
Enclosed is an origina	al and one(1) copy of the article	es 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	
	Q.10 D	ADDITIONAL CO	Status PY REQUIRED	
FROM: THULT JAHN (SU) Name (Printed or typed) (a) (a) (b) (25th A) (a) (a)				
Address				
Weston, Horida 33332 City, State & Zip				
	954 252 Daytime Te	7747	 .	

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) NAME. ARTICLE I The name of the corporation shall be: incorporated The principal place of business/mailing address is: The purpose for which the corporation is organized is: ru and ARTICLE IV SHARES The number of shares of stock is: INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): > Vice President, secretary, treasure Weston Tha REGISTERED AGENT The name and Florida street address of the registered agent is: INCORPORATOR The name and address of the Incorporator is: Having been named as perfistered agent to accept service of process for the above stated corporation at the place designated in this certificate. Lam familiar with and accept the appointment as registered agent and agree to act in this capacity Signature/Registered Agent

Signature/Incorporator