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To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850) 224-8870
Fax Number : (850) 224-7047

FLORIDA PROFIT CORPORATION OR P.A.

SWD & ASSOCIATES INC.

Certificate of Status	0
Certified Copy	1
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
SWD & ASSOCIATES INC.

The undersigned subscriber to these Articles of Incorporation under Sub Chapter S, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I - NAME

The name of this corporation is: **SWD & ASSOCIATES INC.**

The principal place of business and mailing address of this corporation is :
392 SE ATLAS TERRACE, PORT ST. LUCIE, FL 34983

ARTICLE II - NATURE OF BUSINESS

This corporation may engage in any business activity permitted under the laws of the United States and the State of Florida.

ARTICLE III - CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is one-hundred (100) shares of common stock with no par value per share.

ARTICLE IV - TERM OF EXISTENCE

The existence of the corporation shall commence on the date of filing, and shall be perpetual.

ARTICLE V - OFFICERS DIRECTORS

The name and street address of the initial officer and director, who shall hold office for the corporation are:

PRESIDENT:

**STEPHEN DONOVAN
392 SE ATLAS TERRACE
PORT ST. LUCIE, FL 34983**

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ARTICLE VI - INCORPORATOR

The name and street address of the incorporation to this article of incorporation is:

**STEPHEN DONOVAN
392 SE ATLAS TERRACE
PORT ST. LUCIE, FL 34983**

WHEREOF, the undersigned incorporator has executed these **ARTICLES OF INCORPORATION** this 25 day of March, 2004.

Signature of Incorporator



**STATE OF FLORIDA
COUNTY OF ST. LUCIE**

THE FOREGOING instrument was acknowledged and sworn to by _____
before me this 25 day of March, 2004.

JAMES E. CHILDS
Notary Public, State of Florida
My comm. exp: Sept. 3, 2004
Comm. No.: CC 960800


Notary Public

(SEAL)

**ARTICLES OF INCORPORATION FILING FEE: \$35.00
REGISTERED AGENT FILING FEE: \$35.00
CERTIFIED COPY REQUESTED: \$8.75**

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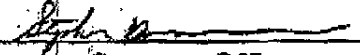
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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325 Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: **SWD & ASSOCIATES INC.**
2. The name and address of the registered agent and office is:

STEPHEN DONOVAN
392 SE ATLAS TERRACE
PORT ST. LUCIE, FL 34983


 Corporate Officer
President
 Title
March 25, 2004
 Date

HAVE BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.


 Registered Agent

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