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





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TRANSMITTAL LETTER

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

SUBJECT: First Cl	noice Condos Inc. (PROPOSED CORPORA	ATE NAME - MUST INCL	GDE SUPPLY)
	ginal and one (1) copy of the art	icles of incorporation and	l a check for:
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status
EDOM: A	ejandrina Sikorski		
FROM:	Name	e (Printed or typed)	
	1801 Fern Ct.	Address	
	Kissimmee Fi. 34746	, State & Zip	
	407-846-4620		
	Davtine	Telephone 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)

ARTICLE I NAME

The name of the corporation shall be:

First Choice Condos Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1801 Fern Ct. Kissimmee Fl. 34746

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Property management

ARTICLE IV SHARES

The number of shares of stock is: 50

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Alejandrina Sikorski 1801 Fern Ct. Kissimmee FL 34746 President

Joseph T. Sikorski 1801 Fern Ct. Kissimmee FL. 34746 Vice President

REGISTERED AGENT ARTICLE VI

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Alejandrina Sikorski 1891 Fern Ct. Kissimmee Fl. 34746

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Alejandrina Sikorski 1801 Fem CT Kussima of Fi- 34746

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

/- 8 - 0 4 Date

7-8-04

Signature/Registered Agent

Signature/Incorporator