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TRANSMITTAL LETTER

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

SUBJECT: _______ S OW PAN Y (PROPOSED CORPORATE NAME - MUST/INCLUDE SUFFIX)

Enclosed are an	original and	one (1) copy	of the articles	of incorporation	and a check for:
		7117 (1) 1127		or mades permittees	

\$70.00 \$78.75
Filing Fee Filing Fee & Certificate of Status

\$78.75 \$\sum \$87.50
Filing Fee & Filing Fee,
& Certificate of Status

ADDITIONAL COPY REQUIRED

FROM:

AMES

Name (Printed or typed)

747 PARK SHORE DRIVE

Address

Address

City, State & Zip

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



gnature/Incorporator

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) 122 ARTICLE I The name of the corporation shall be: The principal place of business/mailing address is: NAPIES, FLORIDA 34102 **PURPOSE** ARTICLE III The purpose for which the corporation is organized is: ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): SUSAN VAILET 747 PARK SHORE DRIVE PRES, TREMSVER JAMES VALLET 747 PARK SHORE DRIVE VP, SECRETARY SUSAN VALLET 747 PARK SHORE DRIVE ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: PARK SHORE DRIVE, NAPISS, FL ARTICLE VII **INCORPORATOR** The name and address of the Incorporator is: 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 gnature/Registered Agent