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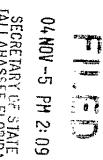
(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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TRANSMITTAL LETTER

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

SUBJECT: Central	Florida Ventures, Inc. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti	cles 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: Me	linda G. Wilson		
	Name	(Printed or typed)	
	3380 Heirloom Rose Pl.	Address	
	Oviedo, Fl 32766		
•	City,	State & Zip	
,	(407) 947-9810	elephone number	
	Day time 1	erebusine mannon	

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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SECRETARY OF STATE TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Central Florida Ventures, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

The address of the principal office of this corporation shall be 3380 Heirloom Rose Pl. Oviedo, Fl 32766

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is:

The maximum number of shares stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having \$1,00 value per share

INITIAL OFFICERS AND/OR DIRECTORS

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

The name and address of each member of the initial Board of Directors of the corporation is Ronald E. Wilson, 3380 Heirloom Rose Pl. Oviedo, Fl 32766, President and Melinda G. Wilson, 3380 Heirloom Rose Pl. Oviedo, Fl 32766, Vice President

REGISTERED AGENT ARTICLE VI

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

The name and address of the initial registered agent is Melinda G. Wilson, 3380 Heirloom Rose Pl. Oviedo, Fl 32766

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

The name and address of the incorporator of these Articles of Incorporation is Melinda G. Wilson, 3380 Heirloom Rose Pl. Oviedo, Fl 32766

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/Incorporator