

205000044298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

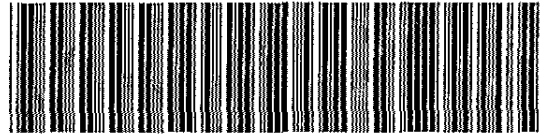
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000048413830

03/17/05--01038--001 **70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 MAR 17 PM 12:49

FILED

TRANSMITTAL LETTER

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

SUBJECT: CIM & Associates, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles 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
Status

ADDITIONAL COPY REQUIRED

FROM: Tammy R Bolton
Name (Printed or typed)

5530 N. 2nd Ave
Address

St Petersburg FL 33710
City, State & Zip

352-978-2023
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 MAR 17 PM 12:49

FILED

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

Articles of Incorporation of CIM & Associates, Inc.

In compliance with Chapter 607 and/or Chapter 621. F.S. (Profit)

ARTICLE 1 NAME

The Name of this Corporation is CIM & Associates, Inc.

ARTICLE 2 PRINCIPAL OFFICE

The principal place of business/mailling address is: 2247 N Citrus Blvd #124
Leesburg FL 34748

ARTICLE 3 PURPOSES

The purpose for which the corporation is organized is to perform any and all activities for which corporations are permitted to conduct business under Florida law.

ARTICLE 4 SHARES

The number of shares is stock is 1000 with no par value.

ARTICLE 5 INITIAL OFFICERS AND/OR DIRECTORS

The address of this Corporation's initial registered office, and the name of its original registered agent at such address is:

Dennis Carroll President/Secretary/Treasurer
2479 Murfreesboro Rd
Nashville, TN 37217

ARTICLE 6 REGISTERED AGENT

The name and Florida street address of the registered agent is: Zachary K. Moss
1840 N Spring Lake Blvd
Fruitland Park FL 34731

ARTICLE 8 INCORPORATOR

The name and address of the Incorporator is: Tammy R. Bolton
5530 2nd Ave North
St. Petersburg FL 33710

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 appointments as registered agent and agree to act in this capacity.

Zachary K. Moss
Signature/Registered Agent/Zachary K. Moss

3/14/05
Date

Tammy R. Bolton
Signature/Incorporator/Tammy R. Bolton

3-14-5
Date

FILED IN THE OFFICE OF THE CLERK OF THE CIRCUIT COURT IN AND FOR THE COUNTY OF FLORIDA

05 MAR 17 PM 12:49

FILED