

POS000065392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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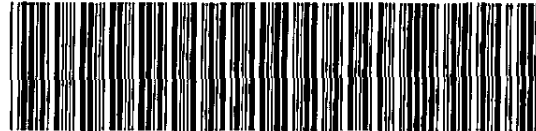
(Business Entity Name)

(Document Number)

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05/02/05--01011--010 **78.75

FILED
MAY 05 2005
MAY 05 2005
MAY 05 2005

J. Shivers MAY 05 2005

TRANSMITTAL LETTER

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

SUBJECT: Suncare Central, 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 ☒ \$78.75
Filing Fee Filing Fee
& Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Suncare Central, Inc.
Name (Printed or typed)

7041 Grand National Drive, Suite 128-B

Address

Orlando, FL 32819

City, State & Zip

(407) 363-2810

Daytime Telephone number

FILED
CLERK OF COURT
DIVISION OF CORPORATIONS
MAY -2 AM 9:23

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:

Suncare Central, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7041 Grand National Drive, Suite 128-B
Orlando, FL 32819

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sales of sun care products.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Ronald M. Hale - President
5325 Rockbourne Court
Orlando, FL 32812

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Ronald M. Hale - President
5325 Rockbourne Court
Orlando, FL 32812

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ronald M. Hale - President
5325 Rockbourne Court
Orlando, FL 32812

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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/Registered Agent

Signature/Incorporator

Date

Date