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# TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 Charlotte Andrews Enterprises, Inc. SUBJECT: \_ (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$87.50 \$70.00 \$78.75 \$78.75 Filing Fee Filing Fee Filing Fee, Filing Fee & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Charlotte A. Andrews FROM: Name (Printed or typed) 21820 NW 6th St. Address Dunnellon, FL 34431 City, State & Zip

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

Daytime Telephone number

352-427-9829

# 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:

Charlotte Andrews Enterprises, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 21820 NW 6th St. Dunnellon, FL 34431

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any lawful business activity as permitted by the laws of the State of Florida.

#### ARTICLE IV SHARES

The number of shares of stock is: 100 shares of One Dollar (\$1.00) par value

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

The only initial officer of the corporation is: Charlotte A. Andrews, President 21820 NW 6th St. Dunnellon, FL 34431

#### ARTICLE VI REGISTERED AGENT

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

Lisa F. Sheffield 21070 E. Pennsylvania Ave. Dunnellon, FL 34432

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Charlotte A. Andrews, 21820 NW 6th St., Dunnellon, FL 34431

ARTICLE VIII EFFECTIVE DATE

The effective date of this corporation is August 20, 2005

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

Date

Signature/Incorporator

Signature/Incorporator

Signature/Incorporator

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