

POS000134236

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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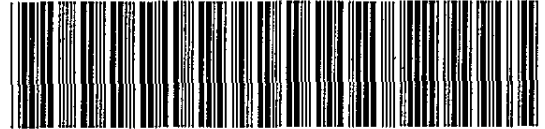
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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10/2/05
BWK

TRANSMITTAL LETTER

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

SUBJECT: SYLVIAN MANAGEMENT CORPORATION
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: CHARLES MUCCIO

Name (Printed or typed)

8695 COLLEGE PARKWAY #267

Address

FORT MYERS FL 33919

City, State & Zip

239-482-6606

Daytime Telephone number

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

ARTICLES OF INCORPORATION

1. The name of the corporation shall be: SYLVIAN MANAGEMENT CORPORATION
2. The principal place of business and mailing address of the corporation is: 6506 WATERWAY BAY DRIVE FORT MYERS FL 33908
3. The corporation shall have the authority to issue 100,000 shares of stock.
4. The registered agent of the corporation is CHARLES MUCCIO and the registered street address is 8695 COLLEGE PKWY #267 FORT MYERS, Florida 33919.
5. The initial Board of Directors shall have 1 member(s) whose name(s) and address(es) is/are as follows: IAN HAWKES 6506 WATERWAY BAY DRIVE FORT MYERS FL 33908

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is CHARLES MUCCIO whose street address is 8695 COLLEGE PARKWAY #267 FORT MYERS FL 33911

Dated SEPT 21, 2005

Charles Muccio
Incorporator

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Dated SEPT 21, 2005

Charles Muccio
Registered Agent

SECRET
SEP 30 11:55
FILE
STATE
FLORIDA