

JAN. 27 2006 2:08PM

CAPITAL CONNECTION

NO. 4019 P. 1

P060000013125

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H060000024157 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I200000000257
Phone : (850) 224-8870
Fax Number : (850) 224-7047

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 JAN 27 PM 2:30

FILED

FLORIDA PROFIT/NON PROFIT CORPORATION

SUMMERS II, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

JAN. 27. 2006 2:08PM

CAPITAL CONNECTION

NO. 4019 P. 2

H06000024157

FILED

ARTICLES OF INCORPORATION 06 JAN 27 PM 2:30

**OF
SUMMERS II, INC.**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

In compliance with the requirements of F.S. Chapter 607 and 621, the undersigned hereby acts as an incorporator in adopting and filing the following articles of incorporation for the purpose of organizing a business corporation.

ARTICLE I

The name of the Corporation is: **SUMMERS II, INC.**

ARTICLE II

The existence of the Corporation shall begin on: the date of filing of these Articles of Incorporation.

ARTICLE III

The street address of the principal office of the Corporation is: 3389 Cypress Gardens Road, Winter Haven, FL 33884-2453.

The mailing address of the Corporation is: Post Office Box 391, Winter Haven, FL 33853-0391.

ARTICLE IV

The specific purpose for which the Corporation is organized is: any legal purpose authorized by law.

ARTICLE V

The maximum number of shares this Corporation is authorized to issue is 100 with a par value \$1.00 per share, all of which shall be Common Shares.

ARTICLE VI

The initial street address of the Corporation's registered office is: 170 East Haines Boulevard, Lake Alfred, FL 33850. The initial registered agent for the Corporation at that address is: **VICTOR R. SMITH.**

H06000024157

JAN. 27. 2006 2:08PM

CAPITAL CONNECTION

NO. 4019 P. 3

H06000024157

ARTICLE VII

The initial board of directors shall consist of two (2) members. This number may be increased from time to time in accordance with the Corporation's bylaws, but shall never be less than two. The name and address of the persons who will serve on the initial board of directors is:

Name	Address
JANICE A. SUMMERS	#14 Lake Eloise Lane Winter Haven, FL 33884-2822
MICHAEL G. SUMMERS	2430 Wildwood Court Winter Haven, FL 33884-3000

ARTICLE VIII

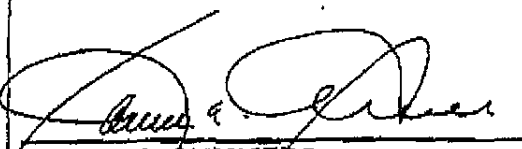
The names and street address of the persons signing these articles of incorporation are:

Name	Address
JANICE A. SUMMERS	#14 Lake Eloise Lane Winter Haven, FL 33884-2822
MICHAEL G. SUMMERS	2430 Wildwood Court Winter Haven, FL 33884-3000

ARTICLE IX

The Corporation shall indemnify its directors, officers, employees, and agents to the fullest extent permitted by law.

IN WITNESS WHEREOF, the undersigned incorporator has executed these articles of incorporation.

 JANICE A. SUMMERS	Dated: January 27, 2006
--	-------------------------


H06000024157

JAN. 27. 2006 2:09PM

CAPITAL CONNECTION

NO. 4019 P. 4

H06000024157

 MICHAEL G. SUMMERS	Dated: January <u>27</u> , 2006
---	---------------------------------

H06000024157

H0600024157

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

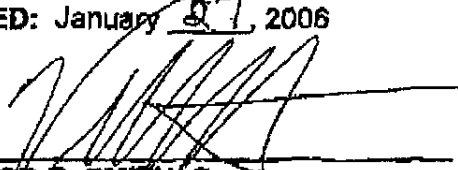
UNDER THE PROVISIONS OF F.S. 607.0501, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the corporation is: **SUMMERS II, INC.**
2. The name and address of the registered agent and office is:

VICTOR R. SMITH, Esquire
170 East Haines Boulevard
Lake Alfred, FL 33850

Having been named as registered agent and to accept service of process for the above-named corporation at the place designated in this certificate, I 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 I am familiar with and accept the obligations of my position as registered agent.

DATED: January 27, 2006


VICTOR R. SMITH, Esquire
Florida Bar No. 0165315
Post Office Box 1145
170 East Haines Boulevard
Lake Alfred, FL 33850-1145
Tel: (863) 956-1118

FILED
06 JAN 27 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H06000024157