



**COVER LETTER**

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

**SUBJECT: Carpe Via, 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: Craig Carlton**

Name (Printed or typed)

**12305 Windswept Avenue**

Address

**Riverview, FL 33569**

City, State & Zip

**813-677-4938**

Daytime Telephone number

**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:

Carpe Via, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

12305 Windswept Avenue  
Riverview, FL 33569

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

All Legal means of profit

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Craig Carlton, President

**ARTICLE VI REGISTERED AGENT**

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

Craig Carlton  
12305 Windswept Avenue  
Riverview, FL 33569

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

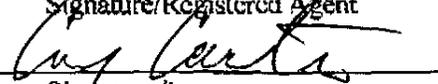
Craig Carlton  
12305 Windswept Avenue  
Riverview, FL 33569

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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

5/9/06  
Date

  
\_\_\_\_\_  
Signature/Incorporator

5/9/06  
Date

FILED  
2006 MAY 11 A 8:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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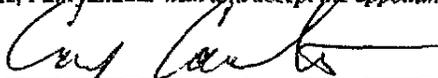
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

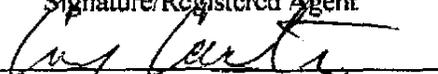
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