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## **COVER LETTER**

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

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	ADDITIONAL CO	Status OPY REQUIRED		
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NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

## 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: PRINCIPAL OFFICE ARTICLE II The principal place of business/mailing address is: ARTICLE III The purpose for which the corporation is organized is: 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): <u>REGISTERED AGENT</u> The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: The name and address of the Incorporator is: menlez

Having been hamed 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

8/10/0

chature incorporator

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