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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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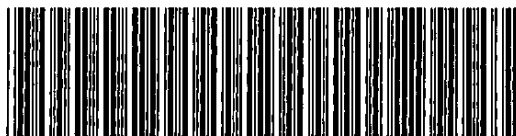
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

for 1/8/07

COVER LETTER

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

FILED
07 JAN -5 PM 3:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STONE COLMAN & GONZALEZ, INCORPORATED

SUBJECT: _____
(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: _____
Name (Printed or typed)

_____163 CYPRESS POINT DRIVE
Address

_____PALM BEACH GARDENS, FLORIDA 33418
City, State & Zip

_____(561) 622-3046

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:

STONE COLMAN & GONZALEZ, INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

163 CYPRESS POINT DRIVE
PALM BEACH GARDENS, FLORIDA 33418

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONSULTING

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

WILLIAM N. DUGATKIN, COO
163 CYPRESS POINT DRIVE
PALM BEACH GARDENS, FLORIDA 33418

ARTICLE VI REGISTERED AGENT

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

WILLIAM N. DUGATKIN
163 CYPRESS POINT DRIVE
PALM BEACH GARDENS, FLORIDA 33418

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WILLIAM N. DUGATKIN
163 CYPRESS POINT DRIVE
PALM BEACH GARDENS, FLORIDA 33418

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

Signature/Incorporator

Date

Date

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TALLAHASSEE, FLORIDA