# P08000108724

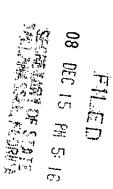
| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
|   |  |  |  |  |
| (Address)                               |  |  |  |  |
| (                                       |  |  |  |  |
|   |  |  |  |  |
| (Address)                               |  |  |  |  |
|   |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
|   |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
|   |  |  |  |  |
| (Document Number)                       |  |  |  |  |
|   |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
| ;                                       |  |  |  |  |
|   |  |  |  |  |
| •                                       |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |





500138722425

12/15/08--01008--023 \*\*87.50





# **COVER LETTER**

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

| SUBJECT: City Con    | mm Inc (PROPOSED CORPORA                   | TE NAME – <u>MUST INCI</u>                         | LUDE SUFFIX)  |
|----------------------|--|--|---|
|                      |  |  |   |
| Enclosed are an orig | inal and one (1) copy of the artic         | cles of incorporation and                          | l a check for:  |
| \$70.00 Filing Fee   | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED |
| FROM: Hu             | inter Sanders                              |  |   |
|                      | Name (                                     | (Printed or typed) .                               | •   |
|                      | 816 Wavecrest Drive                        |  |   |
|                      |  | Address  |   |
|                      | Orlando, Florida 32807                     | State & Zip  |   |
|                      | 4073847282                                 |  |   |
|                      | Daytime T                                  | elephone number                                    | <del></del>   |

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:

City Comm Inc

#### ARTICLE II PRINCIPAL OFFICE

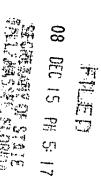
The principal **street** address and mailing address, if different is:

816 Wavecrest Drive Orlando, FL 32807

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail sales of cellular phone and accessories



### ARTICLE IV SHARES

The number of shares of stock is:

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Hunter Sanders President

# ARTICLE VI REGISTERED AGENT

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

Hunter Sanders 816 Wavecrest Drive Orlando, FL 32807

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Hunter Sanders 816 Wavecrest Drive Orlando, FL 32807

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

Date

12-12-08

Signature/Incorporator

Date