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(Requestor's Name)

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(City/State/Zip/Phone #)

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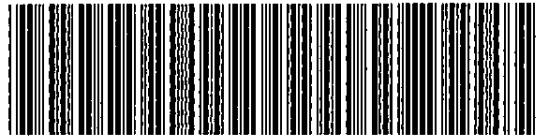
(Business Entity Name)

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2009 SEP 18 P 4: 28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

60-18-6
400

COVER LETTER

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

SUBJECT: CLEAR VIEW PACKAGING, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1)² 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: WILLIAM F. DUB
Name (Printed or typed)

787 JACQUELINE LANE
Address

PALM HARBOR, FL. 34683
City, State & Zip

727-789-6996
Daytime Telephone number

hawk282220@AOL.Com
E-mail address: (to be used for future annual report notification)

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:

CLEAR VIEW PACKAGING, INC.

ARTICLE II PRINCIPAL OFFICE

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

787 JACQUELINE LN.

PALM HARBOR, FL. 34683

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES

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 DUB PRESIDENT

DOROTHY DUB VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

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

LARRY C. SCHALLES CPA

5320 MAIN ST

NEW PORT RICHEY, FL 34652

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WILLIAM DUB

787 JACQUELINE LN.

PALM HARBOR, FL. 34683

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

Larry C Schalles

Signature/Registered Agent

William Dub

Signature/Incorporator

FILED
2009 SEP 18 P 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/16/09

Date

9/16/09

Date