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(Requestor's Name)					
(Add	ress)				
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	MAIT	MAIL			
(Bus	iness Entity Nan	ne)			
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Continue Coning	Cortificator	of Status			
Certified Copies Certificates of Status					
Special Instructions to F	iling Officer:	·			
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COVER LETTER

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

SUBJECT: 1	00 West Hospitality Installations,		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an \$70.00 Filing Fo	original and one (1) copy of the art \$78.75 ee — Filing-Fee & Certificate of Status	\$78.75 Filing-Fee & Certified Copy	\$87.50 Filing-Fee, Certified Copy & Certificate of Status
FROM	William T. Rollis	ne (Printed or typed)	•
	Nain	e (Printed or typed)	
•	100 West Plant Street Suite 2	<u> </u>	·
		Address	
	Winter Garden, FL 34787		
	City	, State & Zip	· · · · · · · · · · · · · · · · · · ·
	407-347-8940	T.11 1	
	Daytime 1	Telephone number	
	kmigetz@rollisconstruction.com		
,	E-mail address: (to be use	ed for future annual report	notification)

NOTE: Please provide the original and one copy of the articles.

 ${\bf ARTICLES~OF~INCORPORATION} \\ {\bf In~compliance~with~Chapter~607~and/or~Chapter~621,~F.S.~(Profit)} \\$

ARTICLE I The name of the co		llations, Inc.	·
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing add	lress, if different is:
-	100 W. Plant Street Suite 260		
_	Winter Garden, FL 34787		
ARTICLE III	DIIDDOSE	· · · · · · · · · · · · · · · · · · ·	
	which the corporation is organized is:		
	awful business		
			•
ARTICLE IV	SHARES		
	res of stock is: 1000		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTORS		
	itle: William T. Rollis Chairman		
Address:	100 W. Plant Street Ste 260	Address:	
	Winter Garden, FL 34787		
	itle: Zachary J. Grabinski Vice Chairman		
Address:	954 W. Washington Blvd. #415 Chicago, IL 60607	Address:	
	Cilicago, IL 60007		
Name and T	ida.		
Address:	itle:	Address:	
·			
ARTICLE VI	REGISTERED AGENT		
	orida street address (P.O. Box NOT acceptable) of	the registered agent is:	2
Name: Address:	William T. Rollis 100 W. Plant Street Suite 260		
Audicss.	Winter Garden, FL 34787		
ADTIOL ELIT			9
ARTICLE VII The name and add	INCORPORATOR tress of the Incorporator is:		27
Name:	William T. Rollis		41.2
Address:	100 W. Plant Street Suite 260		
	Winter Garden, FL 34787		
Haying been nam	ed as registered agent to accept service of process	for the above stated corpora	ation at the place designated in
this certificate, I a	m familiar with and accept the appointment as regis	stered agent and agree to act	in this capacity
	NN 1/1/1		2/2/10
	recrus		3/15/12
-	Required Signature/Registered Agent		Date .
	ment and affirm that the facts stated herein are i		
document to the D	epartment of State constitutes a third degree felony	as provided for in s.817.155,	, F.S.
//	//////////////////////////////////////		3/15/2
	Required Signature/Incorporator		Date