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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : CSH SERVICES, LLC
Account Number : 120070000160
Phone : (800) 494-3124
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TALLAHASSEE, FLORIDA

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
INCO, INCORPORATED

Certificate of Status	0
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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:

INCO, INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6117 NW DENSAW TERRACE
PORT SAINT LUCIE, FL 34986

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is/are:

PRESIDENT

ROBERT E. COLEMAN, JR

6117 NW DENSAW TERRACE
PORT SAINT LUCIE, FL 34986

DIRECTOR

LINDA M. COLEMAN

6117 NW DENSAW TERRACE
PORT SAINT LUCIE, FL 34986

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ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

LINDA M. COLEMAN
6117 NW DENSAW TERRACE
PORT SAINT LUCIE, FL 34986

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

ROBERT E. COLEMAN, JR
6117 NW DENSAW TERRACE
PORT SAINT LUCIE, FL 34986

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TALLAHASSEE, FLORIDA

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.


LINDA M. COLEMAN / Registered Agent

06-06-2012
Date


ROBERT E. COLEMAN, JR /Incorporator

06-06-2012
Date

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