# P95000017440

# TRANSMITTAL LETTER

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

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Enclos	sed is an original  \$70.00  Filing Fae	and one (1) co \$78.75 Filing Fao & Certificate	py of the articles of \$122.50 Filing Foo & Certified Copy	incorporation and a check  [_] \$131,25  Filing Fee, Certified Copy & Certificate	(a)	FILED
	FROM: [1.1, 1.1] A frage  Name (printed or typed)				67	
		Address				
	City, State & Zip					
		Daytime	) C(a 5 C) (3) Telephone number	<u>:</u>		

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

# ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation.

#### ARTICLE | NAME

The name of the corporation shall be:

Expenses of the Michael Comments of the

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Hollywork 16 miles and mary

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ICC Stocker at all you where

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

The second of th

#### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Hacher Carl Core Carl

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

Milfall A: 7/
Signature

Signaturo

Article VI

the perpose of this confunction shall be to include any lawful business

Articles of Incorporation Filing Fee - \$35

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	1
	<del></del>
2. The name and address of the registered agent and office is:	
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(Namo)	3
TOOK THE GAME WAY	.5 m
(P.O. Box not acceptable)	٠, ;=
We might be the the	: 5
(City/State/Zip)	430
	t; 7
laving been named as registered agent and to accept service of process bove stated corporation at the place designated in this certificate, I here appointment as registered agent and agree to act in this cepacity. I function of all statutes relating to the proper and contained of my duties, and I am familiar with and accept the obligations of my states.	for the by accept orther agree oplete perfor- ory position
Medical pi (Signature) (Date)	
(Date)	