

P95000024998

TRANSMITTAL LETTER

FILED

95 MAR 27 AM 10:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

200001441382  
-03/28/95--01066--002  
\*\*\*\*122.50 \*\*\*\*122.50

SUBJECT: FWRN INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check  
for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☒ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

FROM: FWRN INC.  
Name (printed or typed)

901 MARTIN DOWNS STE 306  
Address

PAUM CITY, FLA. 34990  
City, State & Zip

\_\_\_\_\_  
Daytime Telephone number

NANCY HENDRICKS MAR 29 1995

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

## ARTICLES OF INCORPORATION

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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 I NAME

The name of the corporation shall be:

FWRN INC.

### ARTICLE II PRINCIPAL OFFICE

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

901 MARTIN DOWNS BLVD. STE 306  
PALM CITY, FLA. 34990

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 10,000.

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CHUCK CLARK  
901 MARTIN DOWNS BLVD STE. 306  
PALM CITY, FLA. 34990

**ARTICLE V INCORPORATOR(S)**

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

CHUCK CLARK  
901 MARTIN DOWNS BLVD STE 306  
PALM CITY, FLA. 34990

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

23RD day of MARCH, 1995.



Signature

Signature

Signature

**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: FWRN Inc.

2. The name and address of the registered agent and office is:

CHUCK CLARK  
(Name)  
901 MARTIN DOWNS STE. 306  
(P.O. Box not acceptable)  
PALM CITY FLA. 34990  
(City/State/Zip)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Signature)

3/23/95  
(Date)