

# P95000028473

## CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8810  
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

RE: Pointe Vista, Inc.

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matlor No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

55 APR 11 PM 3:32  
 55 APR 11 PM 3:32  
 55 APR 11 PM 3:32

	C.C. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input type="checkbox"/> Foreign Corp. File		
<input checked="" type="checkbox"/> ( ) Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S.		
<input type="checkbox"/> Fictitious Name File		
	900001452889	
	-04/11/95--01036--007	
	****122.50 ***122.50	
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s, _____ Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone ( )		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prop.		
<input type="checkbox"/> FAX ( ) pgs.		
<b>SUBTOTALS</b>		

REQUEST TAKEN CONFIRMED APPROVED  
 DATE \_\_\_\_\_  
 TIME \_\_\_\_\_ CK No. \_\_\_\_\_  
 BY 16 \_\_\_\_\_

WALK-IN Will Pick Up 4-11 11:20

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit invoice number with payment  
 TERMS: NET 10 DAYS FROM INVOICE DATE  
 1 1/2% per month on Past Due Amounts  
 Past 30 Days, 18% per Annum.

THANK YOU  
 from  
 Your Capital Connection

**ARTICLES OF INCORPORATION**

**POINTE VISTA, INC.**

FILED  
95 APR 11 PM 2:22

The undersigned subscriber to these Articles of Incorporation, being a natural person competent to contract, and desiring to form a corporation under the laws of the State of Florida, heroby certifies as follows:

**ARTICLE I - NAMES AND ADDRESSES**

The name of the corporation is POINTE VISTA, INC. and the address of its principal place of business is 3300 S. Hiwassee Road, Suite 107, Orlando, Florida 32835.

**ARTICLE II - DURATION**

The corporate existence of the corporation shall commence on the date of filing these Articles with the office of the Secretary of the State of Florida and shall exist perpetually.

**ARTICLE III - PURPOSE**

The purpose for which the corporation has been formed is as follows: To engage in and transact any or all lawful business for which a corporation may be incorporated under Chapter 607 of the Florida Statutes.

**ARTICLE IV - CAPITAL STOCK**

The aggregate number of shares which the corporation shall have the authority to issue is one thousand (1,000) shares of Common Stock having a par value of TEN CENTS (\$0.10) per share.

#### **ARTICLE V - REGISTERED AGENT AND REGISTERED OFFICE**

The street address of the corporation's registered office is 28 West Central Boulevard, Orlando, Florida 32801 and the name of the corporation's registered agent at such address is WARREN E. WILLIAMS.

#### **ARTICLE VI - DIRECTORS**

The number of directors constituting the initial board of directors shall be one (1) and thereafter the number of directors shall be such number (one or more) as is fixed from time to time in the Bylaws of the Corporation. The director of the Corporation is LEE CHIRA, 3300 S. Hiawassee Road, Suite 107, Orlando, Florida 32835.

#### **ARTICLE VII - INCORPORATOR**

The name and address of the corporation's sole incorporator is WARREN E. WILLIAMS, 28 West Central Boulevard, P. O. Box 3444, Orlando, Florida 32801.

#### **ARTICLE VIII - INDEMNIFICATION**

Each director and officer, in consideration of his service, shall be indemnified, whether then in office or not, for any claims, liabilities, costs or expenses, including but not limited to the reasonable costs and expenses incurred by him/her in connection with the defense of, or for advice concerning any claim asserted or proceeding brought against him by reason of his/her being or having been an officer of the corporation or director of the corporation, whether or not wholly owned or by reason of any act or omission to act as such director or officer. The foregoing

right of indemnification shall not be exclusive of any other rights to which any director or officer may be entitled as a matter of law.

**ARTICLE IX - AMENDMENT**

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendments thereto.

IN WITNESS WHEREOF, these Articles of Incorporation have been signed by the undersigned this 6<sup>th</sup> day of April, 1995.

  
WARREN E. WILLIAMS

STATE OF FLORIDA       )  
                                  ) SS  
COUNTY OF ORANGE    )

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and County aforesaid, to take acknowledgments, personally appeared WARREN E. WILLIAMS, and acknowledged to me that he executed said instrument for the purposes therein expressed. For purposes of identification, he is personally known to me or has produced \_\_\_\_\_ (driver's license) as identification.

WITNESS my hand and official seal in the County and State last aforesaid this 6<sup>th</sup> day of April, 1995.

  
NOTARY PUBLIC

Print Name: \_\_\_\_\_

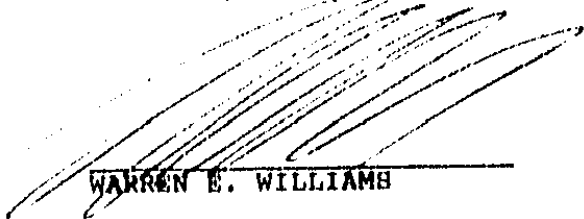
My Commission Expires: \_\_\_\_\_



CAROLYN M. HANSELMAN  
Notary Public, State of Florida  
My Comm. Exp. Mar. 20, 1999  
Comm. No. CC 448572

**Acceptance of Designation as Registered Agent.**

Warren E. Williams does hereby accept the foregoing designation as registered agent for the corporation for service of process as to the above corporation, 28 West Central Boulevard, P. O. Box 3444, Orlando, Florida 32801.



WARREN E. WILLIAMS

RECEIVED  
SEP 11 11 23 32  
FBI - ORL