## P950000 33/12 TRANSMITTAL LETTER

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

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SUBJECT:	SINGLO	ELIVING	INC	
(	Proposed corporate n			
Enclosed is an origina	al and one (1) co	OV Of the articles o	of incorporation :	and a cheek
for:  \$70.00  Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy  Additional Cop	\$131.25 Filing Fee, Certified Copy & Certificate	35 ATA 24
FROM:	MR. Name (	TACK 5/5/ printed or typed)	<u> </u>	6.1:3
	4450	33Kol PL Address	(.S.W.	<b>W</b>
		State & Zip		
	(813) 4	155 - 408	59	
Daytime Telephone number				

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 I NAME

The name of the corporation shall be:

SINGLE LIVING INC

ARTICLE II PRINCIPAL OFFICE

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

4450 23pd PLACE S.W. NAPLES FL. 33999

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

PAUL ROMANO 15095 ROYAL FEEN EC NAPLES SL. 33963 Muct F-100

## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

PAUL ROMANO 15095 ROYAL FEEN L NAPLES LL. 33963 UNIT F-100

TRCK SISK 4450 ISED PL. S.W. NAPLES FL. 33999

The und	ersigned incor	porator(s) has(hav	ve) executed these A	rticles of Incorporat	ion this
_20	day of	April	, 19 <i>9</i> .	<u>5</u> .	
	La	melika	mous	Paus	relent
		1216	Signature	1/ P	<u> </u>
i	7	m	Signature		
	<del></del>		Signature	,	<del></del>

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

1.	The name of the corporation is:	SINGLE LIVING INC
2.	The name and address of the re	gistered agent and office is:
	PAU	- ROMANO (NAME)
		Box or Mail Drop Box NOT ACCEPTABLE)
	_	ES PL 33963
		(CITY/STATE/ZIP)

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.

Paue of Longues - 4/20/95 (SIGNATURE) (DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314