

# P95 0000 419 55

## TRANSMITTAL LETTER

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

000001453430  
-04/11/95--01082--002  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: \_\_\_\_\_

*M. Noel and company, 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

FILED  
95 MAY 30 PM 12:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FROM: Noel L. Goldman  
Name (printed or typed)

2950 Falling Tree Circle  
Address

Orlando, FL 32837  
City, State & Zip

407-438-6676  
Daytime Telephone Number

*Conflict*  
*P95-11829*  
*789, 502, 671*  
*W95-7935*  
*BE 5/30*

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



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

April 13, 1995

NOEL L GOLDMAN  
2950 FALLING TREE CIRCLE  
ORLANDO, FL 32837

SUBJECT: NOEL & CO., INC.  
Ref. Number: W95000007935

FILED  
95 MAY 30 PM 12:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*M. Noel and Company, Inc.*

We have received your document for **NOEL & CO., INC.** and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6919. *6052*

Beth Register  
Corporate Specialist Supervisor

Letter Number: 595A00016969

**ARTICLES OF INCORPORATION  
OF**

95 MAY 30 PM 12:49  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, for the purposes of forming a corporation under the provisions of Chapter 607 of the Florida Statutes, adopts the following Articles of Incorporation:

**ARTICLE I**

**NAME and MAILING ADDRESS**

The name of the Corporation is "M. NOEL AND COMPANY, INC.". The mailing address for the corporation is " 2950 Falling Tree Circle, Orlando, FL 32837 ".

**ARTICLE II**

**TERM OF EXISTENCE**

The existence of the corporation shall begin upon filing of the Articles by the Secretary of State and shall exist perpetually thereafter unless sooner dissolved according to law.

**ARTICLE III**

**PURPOSE**

The general purpose for which the corporation is organized is for the transacting of any business for which corporations may be incorporated under Chapter 607 of the Florida Statutes and any amendments or successor statutes thereto.

**ARTICLE IV**

**AUTHORIZED SHARES**

The aggregate number of shares this corporation shall be authorized to issue shall be 1,000 shares of Common stock at a par value of \$1.00. The shares of the corporation shall be issued for such consideration as may be determined by the Board of Directors but not less than par value.

**ARTICLE V**  
**REGISTERED OFFICE**

The street address of the initial registered office in the State of Florida shall be 2950  
Falling Tree Circle, Orlando, FL 32837 ". The name of the initial registered agent  
at the above address shall be " M. Noel L. Goldman ". The Board of Directors  
may from time to time change the registered office or change the registered agent to any  
other qualified agent.

**ARTICLE VI**  
**NUMBER OF DIRECTORS**

This corporation shall have one (1) director initially. The number of directors may be  
increased or diminished from time to time by the Bylaws, but shall never be less than one  
(1)/ The name and address of the initial director is: " M. Noel L. Goldman, 2950  
Falling Tree Circle, Orlando, FL 32837 ".

**ARTICLE VII**  
**INCORPORATOR**

The name and address of the incorporator is: " M. Noel L. Goldman, 2950 Falling  
Tree Circle, Orlando, FL 32837 ".

**CONSENT OF REGISTERED AGENT**

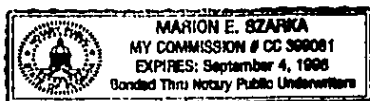
Having been named **Registered Agent** for this corporation at the Registered Office designated in the foregoing Articles of Incorporation, the undersigned accepts such designation.

  
M. Noel L. Goldman

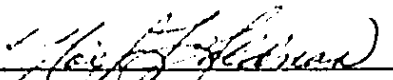
**STATE OF FLORIDA  
COUNTY OF ORANGE**

I hereby certify that on this day, before me, a Notary Public, duly authorized in the state and county named above, to take acknowledgements, personally appeared      
M. NOEL GOLDMAN, to me known to be the person described in and who executed the foregoing **Consent of Registered Agent**.

  
Notary Public  
My Commission Expires 9-4-98



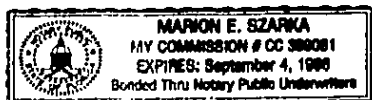
Dated this 22 day of MARCH, 1995.

  
M. Noel L. Goldman

**STATE OF FLORIDA  
COUNTY OF ORANGE**

I hereby certify that on this day, before me, a Notary Public, duly authorized in the state and county named above, to take acknowledgements, personally appeared \_\_\_\_\_  
M. NOEL GOLDMAN to me known to be the person described in and  
who executed the foregoing **Articles of Incorporation** for the purposes therein  
designated.

  
Notary Public  
My Commission Expires: 9-4-98



FILED  
95 MAY 30 PM 12:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA