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TRANSMITTAL LETTER

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
PO BOX 6327  
TALLAHASSEE, FLORIDA 32314

RECEIVED  
JUN 16 1995  
11:11 AM  
\*\*\*\*\*122.50 \*\*\*\*\*122.50

SUBJECT: COLAVITO'S ENTERPRISES INC.  
(PROPOSED CORPORATE NAME)

ENCLOSED IS AN ORIGINAL AND ONE (1) COPY OF THE ARTICLES OF  
INCORPORATION AND OUR CHECK FOR \$122.50.

FROM: RICHARD COLAVITO \_\_\_\_\_  
NAME (PRINTED OR TYPED)  
  
RT 4 BOX 1590 \_\_\_\_\_  
ADDRESS  
  
PALATKA, FLORIDA 32177 \_\_\_\_\_  
CITY, STATE, & ZIP  
  
(904) 328-9840 \_\_\_\_\_  
TELEPHONE NUMBER

FILED  
JUN 16 AM 9:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOTE: PLEASE PROVIDE THE ORIGINAL AND ONE COPY OF THE ARTICLES.

FILED  
55 JUN 16 AM 9:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION  
OF**

THE UNDERSIGNED, DESIRING TO ORGANIZE A CORPORATION UNDER CHAPTER 607, FLORIDA STATUTES, SET FORTH THE FOLLOWING:

**ARTICLE I**

THE NAME OF THIS CORPORATION SHALL BE COLAVITO'S ENTERPRISES, INC.. THE ADDRESS OF THE PRINCIPAL OFFICE OF THE CORPORATION AND THE MAILING ADDRESS OF THE CORPORATION IS: RT 4 BOX 1590  
PALATKA, FLORIDA 32177.

**ARTICLE II**

THE DURATION OF THE CORPORATION SHALL BE PERPETUAL.

**ARTICLE III**

THE GENERAL PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED IS TO INCLUDE THE TRANSACTION OF ANY AND ALL LAWFUL BUSINESS FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER THE FLORIDA GENERAL CORPORATION ACT.

**ARTICLE IV**

THE AGGREGATE NUMBER OF SHARES WHICH THE CORPORATION SHALL HAVE AUTHORITY TO ISSUE IS 1,000 SHARES COMMON STOCK ALL OF ONE CLASS, EACH SHARE HAVING A PAR VALUE OF \$1.00, WHICH MAY BE ISSUED FOR SUCH CONSIDERATION HAVING A VALUE OF NOT LESS THAN THE PAR VALUE OF THE SHARES ISSUED THEREFORE AS TO THE BOARD OF DIRECTORS SHALL BE DEEMED APPROPRIATE.

**ARTICLE V**

THE STREET ADDRESS OF THE CORPORATION'S INITIAL REGISTERED OFFICE IS 6683 CRILL AVENUE PALATKA, FLORIDA 32177, AND THE NAME OF THE REGISTERED AGENT AT THAT OFFICE IS BRENDA WILLIAMS. A WRITTEN ACCEPTANCE AS REQUIRED IN SECTION 607.001, F.S. IS ATTACHED HERETO AND MADE A PART HEREOF.

**ARTICLE VI**

THE NUMBER OF DIRECTORS CONSTITUTING THE INITIAL BOARD OF DIRECTORS IS TWO (2), AND THE NAMES OF THE PERSONS WHO SHALL SERVE AS DIRECTORS ARE: RICHARD COLAVITO PRESIDENT  
BARBARA COLAVITO SECRETARY/TREASURER

**ARTICLE VII**

THE DATE AND TIME OF THE COMMENCEMENT OF THE CORPORATE EXISTENCE SHALL BE THE DAY OF THE FILING OF THESE ARTICLES OF INCORPORATION WITH THE SECRETARY OF STATE OF THE STATE OF FLORIDA.

**ARTICLE VIII**

THE OFFICERS OF THIS CORPORATION SHALL CONSIST OF A PRESIDENT, SECRETARY, AND TREASURER, EACH OF WHOM SHALL BE APPOINTED BY THE BOARD OF DIRECTORS. SUCH OTHER OFFICERS AND ASSISTANTS AND AGENTS AS MAY BE DEEMED NECESSARY MAY BE ELECTED OR APPOINTED BY THE BOARD OF DIRECTORS FROM TIME TO TIME.

**ARTICLE IX**

THE NAME(S) AND STREET ADDRESS(ES) OF THE INCORPORATOR(S) OF THESE ARTICLES OF INCORPORATION IS:

RICHARD COLAVITO RT 4 BOX 1590 PALATKA, FLORIDA 32177  
BARBARA COLAVITO RT 4 BOX 1590 PALATKA, FLORIDA 32177

THE UNDERSIGNED INCORPORATOR(S) HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS 9TH DAY OF JUNE 1995.

  
SIGNATURE

  
SIGNATURE

**FILED**  
95 JUN 16 AM 9:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 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: COLAVITO'S ENTERPRISES, INC.

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

BRENDA WILLIAMS  
(NAME)  
6683 CRILL AVENUE  
(P.O. BOX NOT ACCEPTABLE)  
PALATKA, FLORIDA 32177  
(CITY/STATE/ZIP)

95 JUN 16 AM 9:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

Brenda Williams

DATE JUNE 9, 1995