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10TH FLOOR

4875 NORTH FEDERAL HIGHWAY
FORT LAUDERDALE, FLORIDA 83308

WILLIAM F. LEONARD RICHARD W. MORRISON C. GLENN LEONARD TINA L. PRATT

TELEPHONE (305) 776-3600 FAX (305) 770-3609 Please reply to:

POST OFFICE BOX 11025 FORT LAUDERDALE, FLORIDA 33339

OF COUNSEL: WILLIAM ROBERT LEONARD

June 19, 1995

Mr. David Mann, Director Division of Corporations Secretary of State 409 E. Gaines Street Tallahassee, Florida 32301

100001521041 -08/22/95--01084--010 ****122.50 ****122.50

Re: C & T ADVENTURES, INC.

Dear Mr. Mann:

I enclose herewith the original and one copy of the Articles of Incorporation of C & T ADVENTURES, INC., as well as a check in the amount of \$122.50, as and for the filing fee for said Articles and Registered Agent Designation.

Please return the certified copy of Articles of Incorporation to us as soon as is possible. Your quick service is greatly appreciated.

Sincerely,

WILLIAM F. LEONARD

WFL/cb

Enclosures

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ARTICLES OF INCORPORATION

FILED

OF

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C & T ADVENTURES, INC.

ARTICLE I - Name

The name of this corporation shall be C & T ADVENTURES, INC.

ARTICLE II - Nature of Business

This corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida, including specifically that permitted by Chapter 607, Florida Statutes.

ARTICLE III - Capital Stock

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 shares of common stock having a nominal or par value of One Dollar and No/100 (\$1.00) per share.

ARTICLE IV - Registered Office and Registered Agent

The name and address of the initial Registered Agent is:

WILLIAM F. LEONARD LEONARD & MORRISON 4875 North Federal Highway, 10th Floor Fort Lauderdale, Florida 33308

ARTICLE V - DIRECTORS

The number of directors constituting the initial Board of Directors shall be one (2). The name and address of the person serving on the initial Board of Directors is as follows:

NAME

STREET ADDRESS

SHERI ALANE TREPPEDA

871 N.W. 85th Terrace #1720 Plantation, Florida 33324

CHERYL LYNN CARPENTER

871 N.W. 85th Terrace #1720 Plantation, Florida 33324

ARTICLE VI - Incorporators

The name and street address of the Incorporators of these Articles of Incorporation are:

<u>NAME</u>

ADDRESS

SHERI ALANE TREPPEDA

871 N.W. 85th Terrace #1720 Plantation, Florida 33324

CHERYL LYNN CARPENTER

871 N.W. 85th Terrace #1720 Plantation, Florida 33324

ARTICLE VII - Principal Office

The principal office and mailing address of the corporation is 871 N.W. 85th Terrace, #1720, Plantation, Florida 33324.

The undersigned incorporators have executed these Articles of Incorporation this 10 th day of ________1995,

SHERT ALANE THEPPEDA

STATE OF FLORIDA COUNTY OF BROWARD

I HEREBY CERTIFY that this day in the next above named State and County, before me, an officer duly authorized and acting, personally appeared, SHERI ALANE TREPPEDA, who presented Florida Driver Licenseas identification and who executed the foregoing instrument, and acknowledged then and there before me that she executed said instrument for the purposes and reasons set out therein.

WITNESS my hand and official seal this 10 th day of Tune

OFFICIAL NOTARY SEAL DARLA M BOTTON NOTARY Public MY COMMISSION Expires: MY COMMISSION 5 174 1376

STATE OF FLORIDA COUNTY OF BROWARD

I HEREBY CERTIFY that this day in the next above named State and County, before me, an officer duly authorized and acting, personally appeared, CHERYL LYNN CARPENTER, who presented Florida Dover License as identification and who executed the foregoing instrument, and acknowledged then and there before me that she executed said instrument for the purposes and reasons set out therein.

WITNESS my hand and official seal this 10 Hday of June

OFFICIAL NOTARY SEAL DARLA M SLYTTE SLOTTE DARLA M SLYTTE DARLA M

CERTIFICATE OF DESIGNAT: ON 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 Statu of Florida.

- 1. The name of the corporation is: C & T ADVENTURES, INC.
- 2. The name and address of the registered agent and office is:

WILLIAM F. LEONARD LEONARD & MORRISON 4875 North Federal Highway, 10th Floor Fort Lauderdale, Florida 33308

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 hocept the obligations of my position as registered agent.

Signature

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