

995000064543

TRANSMITTAL LETTER

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

800001564908
-08/21/95--01039--016
*****78.75 *****78.75

SUBJECT: TROPICAL ACCENTS, 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

ck #4803

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: DAVID L. ASHENBRENER
Name (printed or typed)

4206 #9 ENTERPRISE AVE.

Address

NAPLES, FL. 33942

City, State & Zip

(941) 643-2934

Daytime Telephone number

AUG 21 1995

BSB

FILED
95 AUG 18 PM 4:04
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION

FILED
95 AUG 18 PM 4:04

FOR THE STATE
OF FLORIDA

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:

TROPICAL ACCENTS, INC.

ARTICLE II PRINCIPAL OFFICE

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

4206 #9 Enterprise Ave.
Naples, FL. 33942

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 Shares of Common Voting Stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

David L. Ashenbrener
4206 #9 Enterprise Ave.
Naples, FL. 33942

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

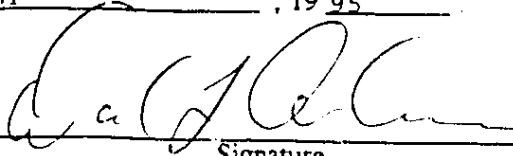
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

DAVID L. ASHENBRENER
5213 30th AVE. SW
NAPLES, FL. 33999

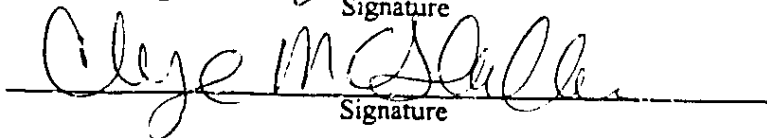
CHERYL M. ASHENBRENER
5213 30th AVE. SW
NAPLES, FL 33999

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

15th day of AUGUST, 19 95



Signature



Signature



Signature

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 607.0521, 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: TROPICAL ACCENTS, INC

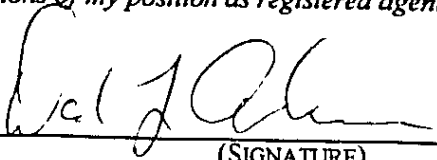
2. The name and address of the registered agent and office is:

DAVID L. ASHENBRENER
(NAME)

4206 #9 ENTERPRISE AVE.
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

NAPLES, FL. 33942
(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.


(SIGNATURE)

8/15/95
(DATE)

FILED
95 AUG 18 PM 4:00
TALLAHASSEE, FL