

P9500073924

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BY FEDERAL EXPRESS

September 21, 1995

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

EFFECTIVE DATE

9-21-95

Re: Incorporation of S. CHAPPELL, INC.

Gentlemen:

Enclosed are the original and one copy of Articles of Incorporation of S. Chapell, Inc. Please file the Articles with an effective date of September 21, 1995, and return a noncertified copy to me. Also enclosed is a check for \$70.00 in payment of the fees for filing and for designation of the registered agent.

Thank you for your attention to this matter.

Very truly yours,

V. D. Sapp
Vincent D. Sapp

VDS:ffw
Enclosures

100001381551
703-22-55-01000-014
*****00.00 *****70.00

BROWN SEP 25 1995

ARTICLES OF INCORPORATION

OF

S. CHAPPELL, INC.

EFFECTIVE DATE
9-21-95

Article I - Name

The name of this corporation is S. Chappell, Inc.

Article II - Duration

This corporation shall commence September 21, 1995, and shall have perpetual existence thereafter.

Article III - Purpose

This corporation is organized for the purpose of transacting any or all lawful business.

Article IV - Capital Stock

This corporation is authorized to issue one hundred thousand (100,000) shares of Ten Dollar (\$10.00) par value common stock, all of the same class.

Article V - Initial Registered Office and Agent

The street address of the initial registered office of this corporation is Parkway Plaza, Suite 112, 10241 Metro Parkway, Fort Myers, Florida 33912, and the name of the initial registered agent of this corporation at that address is Sonia Chappell.

Article VI - Principal Office

The mailing address and street address of the principal office of the corporation is Parkway Plaza, Suite 112, 10241 Metro Parkway, Fort Myers, Florida 33912.

Article VII - Initial Board of Directors

This corporation shall have one director initially. The number of directors may be increased or decreased from time to

time by the Bylaws but shall never be less than one. The name and address of the initial director of this corporation are as follows:

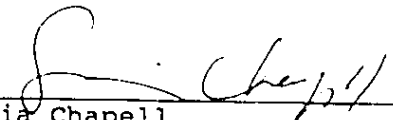
Sonia Chapell
Parkway Plaza, Suite 112
10241 Metro Parkway
Fort Myers, Florida 33912

Article VIII - Incorporator

The name and address of the person signing these Articles of Incorporation are as follows:

Sonia Chapell
Parkway Plaza, Suite 112
10241 Metro Parkway
Fort Myers, Florida 33912


IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation on the 21st day of September, 1995.



Sonia Chapell
Incorporator

OATH OF ACCEPTANCE

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in these Articles of Incorporation, 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.

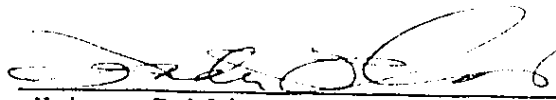


Sonia Chapell
Registered Agent

STATE OF FLORIDA)
)
COUNTY OF LEE)

THE FOREGOING INSTRUMENT was subscribed, sworn to and acknowledged before me by SONIA CHAPPELL, who (X) is personally known to me or () produced a _____ Driver's License as identification.

IN WITNESS WHEREOF, I have hereto set me hand and affixed my official seal, in the State and County aforesaid, this 21st day of September, 1995.



Notary Public
Print or stamp name:
Seal:



FREND A F. WARD
My Comm Exp. 10/28/99
Bonded By Service Ins
No. CC476795
(Personally Known) 1101-1.2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

96 DEC 31 AM 9:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000073924

Corporation Name

S. CHAPELL, INC.

Principal Place of Business

PARKWAY PLAZA, SUITE 112
10241 METRO PARKWAY
FORT MYERS FL 33912

Mailing Address

PARKWAY PLAZA, SUITE 112
10241 METRO PARKWAY
FORT MYERS FL 33912

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2 New Principal Office Address, If Applicable

1 New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City, State

City & State

Zip

Country

Zip

Country

REINSTATEMENT

Date Incorporated or Qualified
To Do Business in Florida

09/21/1995

5 FEI Number

65-0614379

Applied For

Not Applicable

6 CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7 Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Titles	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	CHAPPELL, SONIA	PKWY. PLAZA, STE. 112, 10241 MET	FORT MYERS FL 33912

400002047344--6
-01/07/97--01074--019
****375.00 ****375.00

JB1-2-97

8. Name and Address of Current Registered Agent

CHAPPELL, SONIA
PARKWAY PLAZA, SUITE 112
10241 METRO PARKWAY
FORT MYERS FL 33912

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10 I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

X *L. Chen*

REGISTERED AGENT MUST SIGN

Date

X Dec 27/96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12 I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

L. Chen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Dec 27/96

Daytime Phone #

941.2757383

CR-5040 (7/96)