

P96000006147
TRANSMITTAL LETTER

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

RECEIVED
DIVISION OF STATE
CORPORATIONS
JAN 17 AM 9:21

SUBJECT: WILLIAM M. LOLLI, 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

Additional Copy Required

FROM: WILLIAM M. LOLLI
Name (printed or typed)

21810 NW 7th MANOR

Address

PEMBROKE PINES, FLORIDA 33029

City, State & Zip

(954) 435-4037 (619) 489-2661

Daytime Telephone number

AL JAN 17 1993

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-01/17/96--01104--010
****131.25 ****131.25

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

ARTICLES OF INCORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 JAN 17 AM 9:21

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:

WILLIAM M. LOLLI, INC.

ARTICLE II PRINCIPAL OFFICE

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

21810 NW 7th MANOR PEMBROKE PINES, FLORIDA 33029

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WILLIAM M. LOLLI 21810 NW 7th MANOR PEMBROKE PINES, FL 33029

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):

WILLIAM M. LOLLI 21810 NW 7th MANOR PEMBROKE PINES, FL 33029


LEILA P. TARLTON 21810 NW 7th MANOR PEMBROKE PINES, FL 33029

WILLIAM M. LOLLI _ PRESIDENT, TREASURER

LEILA P. TARLTON _ VICE PRESIDENT, SECRETARY

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

5th day of JANUARY, 19 96.



Signature

x 

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

ARTICLE VI OFFICER TITLES

The name(s) and title(s) of the Officers to these Articles of Incorporation is(are):

WILLIAM M. LOLLI - PRESIDENT, TREASURER

LEILA P. TARLTON - VICE PRESIDENT, SECRETARY

ARTICLE VII INCORPORATED MISSION STATEMENT

The corporation WILLIAM M. LOLLI, INC. has been solely created to allow free and legal use and access of all Title II, Class III federally-regulated devices owned by the corporation to designated officers of the corporation. This corporation exists for these purposes only and not for commerce nor any activity which may be construed as in violation of local, state, or federal laws. All officers of this corporation are required to comply with all local, state, and federal laws while conducting normal business associated with the corporation.

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: WILLIAM M. LOLLI, INC.

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

WILLIAM M. LOLLI

(NAME)

21810 NW 7th MANOR

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

PEMBROKE PINES FLORIDA 33029

(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)

JANUARY 5, 1996

(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314