## P96000006878 TRANSMITTAL LETTER

(Proposad corporato nama - must include suffix)

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

EHDCODO 1 (SE) 220 1 (S -01/03/36--01006--018 \*\*\*\*\*78.75 \*\*\*\*\*78.75

\$70.00 Filing Fee	\$78.75 Filling Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy R	\$131.25 Filing Fee, Certified Copy & Certificate	TĂLLĂ	F 36	41.70
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	(941)	494-0958 Telephone number				
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NOTE: Please provide the original and one copy of the articles.

F 8N JAN 2 3 1996



January 11, 1996

GEORGE CHARSLEY 7210 BRANCH TREE ORLANDO, FL. 32792

SUBJECT: FLORIDA 2000 Ref. Number: W96000000928

We have received your document for FLORIDA 2000 and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6052.

Sandy Ng Document Specialist

Letter Number: 396A00001548

FILED ARTICLES OF INCORPORATION JAN 23 ANTI- 35

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 NAME

The name of the corporation shall be:

Central Florida DOUD, Inc.

ARTICLE II PRINCIPAL OFFICE

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

7210 Branchtree Orlando Fl 32792

ARTICLE III **SHARES** 

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

100

**ARTICLE IV** INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

George Charsley 7210 Branch tree

## 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(use):

George Charsky 7810 Branchtred Orlando Fl 32792

> David Unwin 2316 Rochelle Kissimme FT

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

day of 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 607.0501, 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: ( ) The Toricle 2000	Inc.
2. The name and address of the registered agent and office is:	TATE 95
- George Charsley	JAH 23
-7210 Branch Tree	SEEFL
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	1: 35 Lorida
Color H 32792	- Di

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) SAULARY 96

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