

P96000029424

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904) 224-8870
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
TOLL FREE No. 1-800-342-8062
FAX (904) 222-1222

NAME _____
FIRM _____
ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

RE: Antique Warehouse
Inc. 96 APR -4 AM 11:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- ☒ Capital Express™
- ☒ Art. of Inc. File
- ☐ Corp. Record Search
- ☐ Ltd. Partnership File
- ☐ Foreign Corp. File
- ☒ Cert. Copy(s)
- ☐ Art. of Amend. File
- ☐ Dissolution/Withdrawal
- ☐ C U B
- ☐ Fictitious Name File
- ☐ Name Reservation
- ☐ Annual Report/Reinstatement
- ☐ Reg. Agent Service
- ☐ Document Filing
- ☐ Corporate Kit
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ Document Retrieval
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ File No.'s _____ Copies _____
- ☐ Courier Service
- ☐ Shipping/Handling
- ☐ Phone () _____
- ☐ Top Priority
- ☐ Express Mail Prep.
- ☐ FAX () _____ pgs. _____

SUBTOTALS

FEE..... \$ _____
DISBURSED..... \$ _____
SURCHARGE..... \$ _____
TAX on corporate supplies..... \$ _____
SUBTOTAL..... \$ _____
PREPAID..... \$ _____
BALANCE DUE..... \$ _____

RECEIVED
96 APR -4
DIVISION OF CORPORATE
REGISTRATION

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum.

THANK YOU
from
Your Capital Connection

REQUEST _____ TAKEN _____ CONFIRMED _____ APPROVED _____
DATE _____
TIME _____
BY gen CK No. _____

WALK-IN 4/4 12:00
Will Pick Up

ARTICLES OF INCORPORATION

of

ANTIQUE WORLD, INC.

FILED

96 APR -4 AM 11:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST:

The name of the Corporation shall be ANTIQUE WORLD, INC. The principal mailing address of the corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

SECOND:

The purposes for which the corporation is formed are any and all lawful purposes for which a corporation may be formed pursuant to the laws of the State of Florida and the United States.

THIRD:

The corporation shall be authorized and empowered to issue TEN THOUSAND (10,000) shares of common stock.

FOURTH:

The mailing address of the Registered Office of the Corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

FIFTH:

The registered agent for the corporation shall be:

STANLEY A. GOLDSMITH
1605 Main Street, Suite 1001
Sarasota, Florida 34236

SIXTH:

To the incorporator of ANTIQUE WORLD, INC.:

I understand my obligations as your Registered Agent and hereby accept appointment as your Registered Agent in accordance with F.S. 48.091.

4/3/96
Date


Stanley A. Goldsmith

SEVENTH:

The initial Board of Directors of the corporation shall consist of one (1) member:

Albert L. Maslar, Jr.
159 Croop Lane
Port Charlotte, Florida 33952

EIGHTH:

The incorporator of ANTIQUE WORLD, INC., who by his signature hereby acknowledges the adoption of these Articles of Incorporation, is:

Albert L. Maslar, Jr.
ALBERT L. MASLAR, JR.
1605 Main Street
Suite 1001
Sarasota, Florida 34236

FILED
96 APR -1 AM 11:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
4/3/96

STATE OF FLORIDA)
COUNTY OF SARASOTA) ss:

The foregoing Articles of Incorporation of ANTIQUE WORLD, INC., were acknowledged before me this 3 day of April 1996, by STANLEY A. GOLDSMITH as registered agent. He is personally known to me or has produced via as identification and did not take an oath. If no type of identification is indicated, the above-named person is personally known to me.

Andrea Bailey
Signature of Notary Public

Print Name of Notary Public

I am a Notary Public of the State of
Florida, and my commission
expires on _____.



ANDREA BAILEY
My Commission CC206491
Expires Jul. 17, 1997
Bonded by ANB
800-852-6878

The foregoing Articles of Incorporation of ANTIQUE WORLD, INC., were acknowledged before me this 3 day of April 1996, by ALBERT L. MASLAR, JR., as incorporator. He is personally known to me or has produced via as identification and did not take an oath. If no type of identification is indicated, the above-named person is personally known to me.

Andrea Bailey
Signature of Notary Public

Print Name of Notary Public

I am a Notary Public of the State of
Florida, and my commission
expires on _____.



ANDREA BAILEY
My Commission CC206491
Expires Jul. 17, 1997
Bonded by ANB
800-852-6878