

P96000039923

TRANSMITTAL LETTER

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

200001809952
-05/06/96--01072--015
***131.25 ***131.25

SUBJECT: Beachcomber Management, 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:

Shirley ADAMS
Name (printed or typed)

2377 Davis Blvd
Address

Naples, FL 33942
City, State & Zip

941 434-2272
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 HY-3 PH 1-24

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

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ARTICLES OF INCORPORATION

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:

BEACHCOMBER MANAGEMENT, INC.

ARTICLE II PRINCIPAL OFFICE

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

2377 DAVIS BLVD., NAPLES, FLORIDA 33942

ARTICLE III SHARES

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

ONE HUNDRED (100)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SHIRLEY ADAMS
2377 DAVIS BLVD.
NAPLES, FLORIDA 33942

ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

SHIRLEY ADAMS
2377 DAVIS BLVD.
NAPLES, FLORIDA 33942

The undersigned incorporator has executed these Articles of Incorporation this 18 day of April, 1996.


SHIRLEY ADAMS

FILED
STATE OF FLORIDA
SECRETARY OF STATE
APR 18 1996

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 corporations is: **BEACHCOMBER MANAGEMENT, INC.**
2. The name and address of the registered agent and office is:

SHIRLEY ADAMS
2377 DAVIS BLVD.
NAPLES, FLORIDA 33942

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.

Shirley Adams
SHIRLEY ADAMS

4/18/96
DATE

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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