9600055399 TRANSMITTALLETTER 5399

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

SUBJECT: AmeriSt	itch, Inc.			
		e name - must include s	uffix)	
Enclosed is an original for : \$70.00 Filing Fee	and one (1) cop xx \$78.75 Filing Fee & Certificate	by of the articles of \$122.50 Filing Fee & Certified Copy	incorporation and \$131.25 Filing Fee, Certified Copy & Certificate	SECTE HELED SECTE HELESEE, FLORIDA TALLAILASSEE, FLORIDA
FROM:	AmeriStit			
	Name	(printed or typed)		
	7272 Lake	Drive		, <i>k</i> ,
	•	Address		1/2/16
	Fort Myer	s, FL 33908		456/1,6
	C	ity, State & Zip		
	941-454-07	700		
	Davtime	Telephone number	<u> </u>	J /*

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

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: AmeriStitch, Inc.

ARTICLE II PRINCIPAL OFFICE

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

7272 Lake Drive, Fort Myers, FL 33908

ARTICLE III SHARES

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

One Thousand; (1,000)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

John E. Stamps, CPA 1937 Grace Avenue Fort Myers, FL 33901

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Melinda Kellam, President 7272 Lake Drive Fort Myers, FL 33908

Tim Knox, Secretary 7272 Lake Drive Fort Myers, FL 33908

The undersign	ed incorporator(s) I	has(have) execut	ted these Articles of Incorporation
1	day of	MAY	, 19 <u>9b</u> .
<u></u>	Nelindi Kelli	INU Signature	Melinda Kellam
<u>-</u> -	<u> </u>	Signature	Tim Knox
	-	Signature	

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PUPSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: AmeriStitch, Inc.					
2. The name a	nd address of the registered agent and office is:				
John E. Stamps CPA					
	· (Name)				
	'937 Grace Avenue				
	(P.O. Box not acceptable)				
	Fort Myers, FL 33901				
	(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) 17 Mary 96
(Date)