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SECRETARY OF STATE

ALLAHASSEE, FLOORIA

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

300000 1915542 50000 1915542

SUBJECT:Alluvi	on, Inc.			
		name - must include suffix)		
for : ☐ \$70.00	and one (1) co	ppy of the articles of incorporation and a check		
Filing Fee	Filing Fee & Cortificate	Filing Fee Filing Fee, & Certified Copy		
	a coronado	& Certified Copy & Certified Copy & Certificate Additional Copy Required		
FRÓM:	Cynthia S	. Davis		
Name (printed or typed)				
	17/77 0 .			
	17437 Orio	Address		
		5. FL 33912 7. State & Zip		
	City	, Suite & 21p		
941-598-9992				
	Daytime 1	Selephone number		
		Cynthia GAVE		
Spoke to Cynthia 15 aware of similar		AUTHORIZATION BY PHONE TO CORRECT P.A. address		
name death 950000 102	17	DATE 8-9-96		
·		DOC. EXAM. M		
NOTE: Please pr	rovide the ori	ginal 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:

Alluvion, Inc.

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ARTICLE II : PRINCIPAL OFFICE

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

Alluvion, Inc. #5 Twelfth Street North Naples, FL 34102

ARTICLE III SHARES

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

100,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Cynthia S. Davis #5 Twelfth Street North Mapleo, Fl 34102

ARTICLE V INCORPORATOR(S)

See instructions for officera/directors

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

Linda Rice, President 1303 Solana Rd. Naples, FL 33940

Cynthia S. Davis, Vice-President 17437 Oriole Rd. Fort Myers, FL 33912

The undersigned inc	corporator(s) has(ha	ve) executed these Artic	les of Incorporation this
lst day of	August	, 19 <u>96</u> .	
(An additional article	must be added if a	n effective date is reques	ted.)
	12		
L	Inda Rice	Signature	
	Cythin :	Signature	
C	ynthia S. Davis	Signature	
		Signature	

Notarization is not required

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: Alluvion. Inc.	
		·
2.	The name and address of the registered agent and office is:	
		⊼ 's 9
	Cynthia S. Davis	원 96
	(NAME)	記しまり
	#5 Twelfth Street North	SSE -7
	(P.O. BOX OF MAIL Drop BOX NOT ACCEPTABLE)	
	Naples, FL 34102	FLORI STA:
	(CITY/STATI/ZD)	DH 44

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.

Cynthia 5, Sais August 1, 1996
(SIGNATURE) (DATE)

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