

P96000084254

Valerie V. Watts
3615 W. Waters Ave.
Tampa, FL 33614

(813) 935 7011
City/State/Zip

ic _____
Phone # _____

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Valwaco, Inc. (Corporation Name) _____ (Document #) _____
2. _____ (Corporation Name) _____ (Document #) _____
3. _____ (Corporation Name) _____ (Document #) _____
4. _____ (Corporation Name) _____ (Document #) _____

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

FILED
96 OCT 11 PM 2:18
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

700001960317
-10/01/96--01019--009
*****70.00 *****70.00

OCT 3 1996 BSRB

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

691
W94-20896

Examiner's Initials _____



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 3, 1996

VALERIE V. WATTS
3615 W. WATERS AVENUE
TAMPA, FL 33614

SUBJECT: VALWACO, INC.
Ref. Number: W96000020896

We have received your document for VALWACO, INC. and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must state the number of shares of authorized stock.

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) 487-6925.

Brenda Baker
Corporate Specialist

Letter Number: 396A00045238

**ARTICLES OF INCORPORATION
OF
VALWACO, INC.**

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I. NAME

The name of the Corporation is VALWACO, INC.

ARTICLE II. PRINCIPAL OFFICE

The principal office of the Corporation is at 3615 W. Waters Ave., Tampa, Florida, 33614

ARTICLE III. REGISTERED AGENT

The registered agent for the Corporation is Valerie V. Watts, the address to be used for service to the Corporation shall be 3615 W. Waters Ave., Tampa, Florida, 33614.

ARTICLE IV. INCORPORATORS

The name and address of Incorporator is as follows:

Valerie V. Watts	3615 W. Waters Ave. Tampa, Florida 33614
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ARTICLE V. DURATION

The Corporation shall have perpetual existence.

ARTICLE VI. PURPOSES

This Corporation is organized for the purpose of transacting any and all lawful business.

FILED
95 OCT 11 PM 2:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
OF
VALWACO, INC.**

ARTICLE VII POWERS

The Corporation may exercise any powers, without limitation whatsoever, which a corporation may legally exercise under the laws of the State of Florida where the Corporation is formed. In addition, the Corporation shall have the following specific powers:

(A) To elect and appoint officers and agents of the Corporation and to fix their compensation;

(B) To act as an agent for any individual, association, partnership, corporation or other legal entity;

(C) To receive, acquire, hold, exercise rights arising out of the ownership or possession hereof, sell, or otherwise dispose of, shares or other interests in, or obligations of, individuals, associations, partnerships, corporations or governments;

(D) To receive, acquire, hold, pledge, transfer, or otherwise dispose of shares of the Corporation;

(E) To make gifts or contributions for the public welfare or for charitable, scientific or educational purposes.

ARTICLE VIII CAPITAL STOCK

Section 1. Authorized Shares. The total number of shares which this Corporation is authorized to issue is One Thousand Five Hundred (1,500).

Section 2. Preemptive Rights. Except as may otherwise be provided by the Board of Directors, no holder of any shares of the stock of the Corporation shall have any Preemptive right to purchase, subscribe for, or otherwise acquire any shares of stock of the Corporation of any class now or hereafter authorized, or any securities exchangeable for or convertible into such shares, or any warrants or other instruments evidencing rights or options to subscribe for, purchase, or otherwise acquire such shares.

ARTICLE IX COMMENCEMENT OF BUSINESS

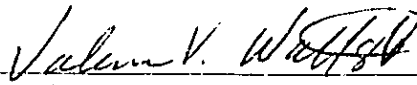
The minimum amount of capital with which the Corporation will commence business is One Hundred Dollars (\$100.00)

ARTICLES OF INCORPORATION
OF
VALWACO, INC.

ARTICLE X INTERESTED DIRECTORS

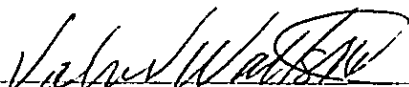
No contract or transaction between this Corporation, any of its directors, or between this Corporation, any other corporation, firm, association, or other legal entity shall be invalidated by reason of the fact that the director of the Corporation has direct or indirect interest, pecuniary or otherwise, in such corporation, firm, association, or legal entity, or because the interested director was present at the meeting of the Board of Directors which acted upon or in reference to such contract or transaction, or because they participated in such action, provided that the interest of each such director shall have been disclosed to or known by the Board, and a disinterested majority of the Board shall have nonetheless ratified and approved such contract or transaction. Such interested director or directors may be counted in determining whether a quorum is present for the meeting at which such ratification or approval of such contract or transaction, then such contract or transaction shall, with disclosure of the director's or director's interest, be submitted for the approval of or ratification by the stockholders.

IN WITNESS WHEREOF, the undersigned have hereunto set his hand this 23
day of SEPTEMBER, 1996.



Valerie V. Watts

I understand, accept and assume the duties and responsibilities of the position of the Registered Agent of the aforementioned Corporation.



Valerie V. Watts
3615 W. Waters Ave.
Tampa, Florida 33614

96 OCT 11 PM 2:18
STATE
TALLAHASSEE, FLORIDA

770 - 455-2360

Received # 7/17/96

PA 60000084254

59-3399610

SS-4 Application for Employer Identification Number

1 Name of applicant (Legal name) (See instructions.)
Valerie V. Watts

2 Trade name of business, if different from name in line 1
Valwaco, Inc.

3 Executor, trustee, "care of" name

4a Mailing address (street address) (room, apt., or suite no.)
3615 W. Waters Ave

4b City, state, and ZIP code
Tampa, FL 33614

5a Business address, if different from address in lines 4a and 4b
3615 W. Waters Ave.

5b City, state, and ZIP code
Tampa, FL 33614

6 County and state where principal business is located
Hillsborough, Florida

7 Name of principal officer, general partner, grantor, owner, or trustee—SSN required (See instructions.) ▶
Valerie V. Watts SS# 266 55 3953

8a Type of entity (Check only one box.) (See instructions.)

<input type="checkbox"/> Sole Proprietor (SSN)	<input type="checkbox"/> Estate (SSN of decedent)	<input type="checkbox"/> Trust
<input type="checkbox"/> REMIC	<input type="checkbox"/> Plan administrator-SSN	<input type="checkbox"/> Partnership
<input type="checkbox"/> State/local government	<input type="checkbox"/> Personal service corp.	<input type="checkbox"/> Other corporation (specify)
<input type="checkbox"/> Other nonprofit organization (specify)	<input type="checkbox"/> National guard	<input type="checkbox"/> Federal government/military
<input checked="" type="checkbox"/> Other (specify) ▶ <u>Corporation</u>	<input type="checkbox"/> Church or church controlled organization	(enter GEN if applicable)

8b If a corporation, name the state or foreign country (if applicable) where incorporated ▶ State Florida Foreign country

9 Reason for applying (Check only one box.)

<input type="checkbox"/> Started new business (specify) ▶	<input type="checkbox"/> Changed type of organization (specify) ▶
<input type="checkbox"/> Hired employees	<input checked="" type="checkbox"/> Purchased going business <u>New Corporation</u>
<input type="checkbox"/> Created a pension plan (specify type) ▶	<input type="checkbox"/> Created a trust (specify) ▶
<input type="checkbox"/> Banking purpose (specify) ▶	<input type="checkbox"/> Other (specify) ▶

10 Date business started or acquired (Mo., day, year) (See instructions.)
August 26, 1996

11 Enter closing month of accounting year. (See instructions.)
December

12 First date wages or annuities were paid or will be paid (Mo., day, year). Note: If applicant is a withholding agent, enter date income will first be paid to nonresident alien. (Mo., day, year) ▶ 11-1-96

13 Enter highest number of employees expected in the next 12 months. Note: If the applicant does not expect to have any employees during the period, enter "0".

Nonagricultural	Agricultural	Household
	<u>2</u>	

14 Principal activity (See instructions.) ▶ Postal Business, Communication Services

15 Is the principal business activity manufacturing? Yes No

16 To whom are most of the products or services sold? Please check the appropriate box.

<input checked="" type="checkbox"/> Public (retail)	<input type="checkbox"/> Business (wholesale)	<input type="checkbox"/> N/A
<input type="checkbox"/> Other (specify) ▶		

17a Has the applicant ever applied for an identification number for this or any other business? Yes No

17b If you checked the "Yes" box in line 17a, give applicant's legal name and trade name, if different than name shown on prior application.

Legal name ▶ Trade name ▶

17c Enter approximate date, city, and state where the application was filed and the previous employer identification number if known.

Approximate date when filed (Mo., day, year)	City and state where filed	Previous EIN

Under penalty of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, it is true, correct, and complete.

Name and title (Please type or print clearly.) ▶ Valerie V. Watts - President

Signature ▶ Valerie V. Watts Date ▶ 9/12/96

Please leave blank ▶

Geo.	Ind.	Class	Size	Reason for applying

For Paperwork Reduction Act Notice, see attached instructions. Cat. No. 15055N Form 99-4 (Rev. 12-93)

KS 10/15 page 714,124 mzu