

PA6000087333

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

RE:

COT-WOOD COACH, Inc.

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 \$ _____

	C.C. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express™		
<input type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input checked="" type="checkbox"/> Foreign Corp. File		
<input type="checkbox"/> () Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S:		
<input type="checkbox"/> Fictitious Name File		
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s, _____ Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone () _____		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX () _____ pgs.		

SUBTOTALS

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

REQUEST TAKEN CONFIRMED APPROVED
DATE _____
ME _____
LK-IN _____
Pick Up _____

CK No. _____

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

ARTICLES OF INCORPORATION
OF
COL-WOOD COACH, INC.

FILED
96 OCT 23 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as incorporator of a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation:

ARTICLE I. NAME

The name of this corporation is Col-Wood Coach, Inc.

ARTICLE II. PRINCIPAL OFFICE OR MAILING
ADDRESS OF CORPORATION

The principal office and mailing address of this corporation is: 1628 Loves Point Drive, Leesburg, Florida 34748.

ARTICLE III. CAPITAL STOCK

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

One thousand (1,000) shares of common stock
all of one class, having a nominal or par
value of ONE DOLLAR (\$1.00) per share.

ARTICLE IV. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 1000 West Main Street, Leesburg, Florida 34748, and the name of the initial registered agent of this corporation at that address is Stephen W. Johnson.

ARTICLE V. INCORPORATOR

The name and address of the person signing these Articles of Incorporation is Stephen W. Johnson, 1000 West Main Street, Leesburg, Florida 34748.

ARTICLE VI. AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 22nd day of October, 1996.



Incorporator

ACCEPTANCE BY REGISTERED AGENT:

I AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS REGISTERED AGENT FOR SAID CORPORATION.



Name: Stephen W. Johnson

STATE OF FLORIDA
COUNTY OF LAKE

The foregoing instrument was acknowledged before me this 26th
day of October, 1996, by Stephen W. Johnson, Incorporator, who did
not take an oath.

Debra M. Morton
NOTARY PUBLIC-STATE OF FLORIDA
(Signature of Notary)
Debra M. Morton
Typed name of Notary)

Personally known ✓ or
Produced Identification _____

[SEAL]
OFFICIAL NOTARY SEAL
DEBRA M MORTON
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC320753
MY COMMISSION EXP. NOV. 1, 1997
(Commission Number)

Type of Identification
Produced: _____