

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

NAME _____

FIRM _____

ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Mailor No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

RE: William N Veloz

Inc.

	C.C. FEE.	DISBURSED
<input type="checkbox"/> Capital Express™		
<input type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input 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.....	

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 Connection

REQUEST TAKEN CONFIRMED APPROVED

DATE _____

TIME _____ CK No. _____

BY AAK _____

WALK-IN Will Pick Up 10-1 1100 11/14



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

RECEIVED
96 NOV 14 AM 10:11
DIVISION OF CORPORATION

October 1, 1996

CAPITAL CONNECTION, INC.
417 E. VIRGINIA STREET
SUITE 1
TALLAHASSEE, FL 32301

SUBJECT: WILLIAM N. VELOZ, INC.
Ref. Number: W96000020675

We have received your document for WILLIAM N. VELOZ, INC. and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

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) 487-6926.

Teresa Brown
Corporate Specialist

Letter Number: 196A00044839

and principal

Corrected

FILED
96 OCT -1 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

WILLIAM N. VELOZ, INC.

The undersigned subscribers to these Articles of Incorporation, natural persons competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I-CORPORATE NAME

The name of the corporation is: WILLIAM N. VELOZ, INC.

ARTICLE II-DURATION

This corporation shall begin October 1, 1996 and exist perpetually unless dissolved according to Florida law.

ARTICLE III-PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV- CAPITAL STOCK

The corporation is authorized to issue FIVE HUNDRED (500) shares of One Dollar (\$1.00) value Common Stock, which shall be designated "Common Shares."

ARTICLE V-INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Initial Registered Agent of this Corporation is:

MELINDA M. VELOZ
375 PRATHER DR.
FORT MYERS, FL. 33919

ARTICLE VI-INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) directors initially. The number of directors may be either increased or diminished from time to time by the ByLaws, but there shall never be less than one (1). The names and addresses of the initial directors of the corporation are as follows:

**WILLIAM N. VELOZ
MELINDA M. VELOZ
375 PRATHER DR.
FORT MYERS, FL. 33919**

ARTICLE VII-INCORPORATORS

The names and addresses of the persons signing these Articles of Incorporation are as follows:


**WILLIAM N. VELOZ
MELINDA M. VELOZ
375 PRATHER DR.
FORT MYERS, FL. 33919**


ARTICLE VIII-OFFICERS

The initial officers of this Corporation are as follows:

PRESIDENT: William N. Veloz
SECRETARY/TREASURER Melinda M. Veloz

IN WITNESS WHEREOF, the undersigned subscribers have executed these Articles of Incorporation this 27th day of Sept., 19 96


WILLIAM N. VELOZ (Seal)


MELINDA M. VELOZ (Seal)

STATE OF FLORIDA)

SS

COUNTY OF LEE)

before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared William N. Veloz and Melinda M. Veloz known to me and known to be the persons who executed the foregoing Articles of Incorporation, and who acknowledged before me that they executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 27th day of September, 1996

Mary Ann Burks
Notary Public, State of Florida at Large

My commission expires 08/12/00
Commission No. CC 576530

My commission expires 08/12/00

Bonded Through Fla. Heavy Service & Bonding Co.

FILED
96 OCT -1 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT**

**CERTIFICATE OF REGISTERED AGENT OF
WILLIAM N. VELOZ, INC.**

Pursuant to Florida Statutes Sections 48.091 and 607.034, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office and principal office as indicated in the Articles of Incorporation at 375 Prather Dr., Fort Myers, Fl. 33919 has named Melinda M. Veloz, located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Melinda VELOZ
Melinda M. Veloz
Registered Agent