

P97 0000 25196

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904) 224-8870  
Mailing Address: Post Office Box 10149, Tallahassee, FL 32302  
TOLL FREE No. 1-800-342-8062  
FAX (904) 222-1222

NAME \_\_\_\_\_  
FIRM \_\_\_\_\_  
ADDRESS \_\_\_\_\_

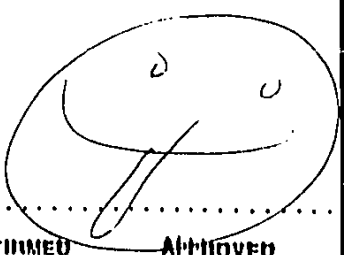
PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
One Day Service Two Day Service

To Us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Out \$ \_\_\_\_\_



Request TAKEN \_\_\_\_\_ CONFIRMED \_\_\_\_\_ APPROVED \_\_\_\_\_  
DATE 03/20/97 \_\_\_\_\_  
TIME 10:30 \_\_\_\_\_ ck. No. \_\_\_\_\_  
by CD \_\_\_\_\_

WALK-IN  
will pick up \_\_\_\_\_

\_\_\_\_\_ of \_\_\_\_\_ No.  
RE: Lumberto & Son, Inc

	C.C. FEE.	DISE.
<input checked="" type="checkbox"/> Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. Filing		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership Filing		
<input type="checkbox"/> Foreign Corp. Filing		
<input checked="" type="checkbox"/> Cert. Copy(s)		
<input checked="" type="checkbox"/> PHOTO		
<input type="checkbox"/> Art. of Amend. Filing		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S.		
<input type="checkbox"/> Fictitious Name Filing		
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Statement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Seal		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving License		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 Filing		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Withdrawal		
<input type="checkbox"/> Filing 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 ( ) _____ lgs.		

SUBTOTALS	
Fee.....	
business.....	
SEARCH.....	
TAX on corporate supplies.....	
SUBTOTAL.....	
INTERAL.....	
BALANCE DUE.....	

RECEIVED

97 MAR 20 AM 11:31

DIVISION OF CORPORATION

Please remit invoice number with payment  
TERMS: NET 10 DAYS FROM INVOICE DATE  
1 1/2% per month on Past Due Amount  
Past 30 Days, 10% per Month.

THANK  
from  
Your Capital C

**ARTICLES OF INCORPORATION  
OF  
UMBERTO & SON, INC.**

FILED  
97 MAR 20 PM 1:11  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**ARTICLE I - NAME AND PRINCIPAL ADDRESS**

The name of the corporation is Umberto & Son, Inc., and the principal address and principal place of business is 18167 U.S. Highway 19 North, Suite 150, Clearwater, Florida 34624.

**ARTICLE II - REGISTERED OFFICE AND AGENT**

The address of its registered office in the State of Florida is c/o PATEL, MOORE & O'CONNOR, P.A., 18167 U.S. Highway 19 North, Suite 150, in the City of Clearwater, County of Pinellas, Florida 34624. The name of its registered agent at such address is Patrick M. O'Connor.

**ARTICLE III - PURPOSE**

The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of the State of Florida.

**ARTICLE IV - AUTHORIZED SHARES OF STOCK**

The total number of shares of stock which the corporation is authorized to issue is Ten Thousand (10,000) and the par value of each of such shares is Ten Cents (\$0.10) amounting in the aggregate to One Thousand Dollars (\$1,000.00).

**ARTICLE V - BOARD OF DIRECTORS**

The business and affairs of the corporation shall be managed by the board of directors, and the directors need not be elected by ballot unless required by the bylaws of the corporation. The names and mailing addresses of each person who is to initially serve as a director until the first annual meeting of the stockholders or until a successor is elected and qualified, are as follows:

**NAME**

**MAILING ADDRESS**

Carol Pizzini

18167 U. S. Highway 19 North, Suite 150  
Clearwater, Florida 34624

In furtherance and not in limitation of the powers conferred by the laws of the State of Florida, the board of directors is expressly authorized to adopt, amend or repeal the bylaws of this corporation.

#### ARTICLE VI - AMENDMENTS

The corporation reserves the right to amend and repeal any provision contained in this Certificate of Incorporation in the manner prescribed by the laws of the State of Florida. All rights conferred are granted subject to this reservation.

#### ARTICLE VII - INCORPORATOR

The incorporator is Patrick M. O'Connor, whose mailing address is c/o PATEL, MOORE & O'CONNOR, P.A., 18167 U.S. Highway 19 North, Suite 150, Clearwater, FL 34624.

THE UNDERSIGNED, being the incorporator, for the purpose of forming a corporation under the Laws of the State of Florida, does make, file and record this Certificate of Incorporation, does certify that the facts herein stated are true, and, accordingly, have hereunto set his hand and seal this 19th day of March, 1997.

By: \_\_\_\_\_

Patrick M. O'Connor  
Incorporator

FILED  
93 MAR 20 PM 1:21  
TALLAHASSEE, FLORIDA

#### **Acknowledgment of Registered Agent**

I hereby am familiar with and accept the duties and responsibilities as Registered Agent for said corporation.

By: \_\_\_\_\_

Patrick M. O'Connor  
Registered Agent