DIOOO3873/ TRANSMITTAL LETTER

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

SUBJECT: _	SMART	CHOICE O	FFICE SUPPLY, rate name - must include suffi	x)	-	
			ຮບ	00021.256 -03/27/9701(*****78.75	337007	
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :						
☐ \$70.0 Filing F	ee Fi	\$78.75 ling Fee Certificate	S122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate		
			ADDITIONAL CO	PY REQUIRED	ļ	
FROM:	Sonya L Tuten) Name (Printed or typed)					
1304 N 15th Street Address						
	I,	mmoKalee City, Stat	F1 34142 e& Zip			
		(941) (05 Daylime Telep	57- 5519 Dhone number			

NOTE: Please provide the original 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:

SMART CHOICE OFFICE SUPPLY INC.

ARTICLE II PRINCIPAL OFFICE

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

Sonya L TuteN

POBOX 5241

Immokalee, FI 3.4143

1255 N 15th Street, UNIT#4

Immokalee, FI 34142

ARTICLE III SHARES

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

JACK E TUTEN 50% Sonya L Tuten 50%

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

Sonya L Tulen 1255 N 15th Street UNIT #4 Immokalel, F1 34142

ARTICLE V **INCORPORATOR(S)**

See instructions for officers/directors

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

Immikalee F1. 34142

JACK E. TUTEN Sonya L. Tuten
1304 N 15th Street 1304 N 15th Street Immokale, F134142

JACK E. Tuten 50% Sony4 L Tuten 50%

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

24 day of march 1997.

(An additional article must be added if an effective date is requested.)

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 c	rporation is SM A2T CHOICE OFFICE SUPPLY, INC.
2. The name and add	ess of the registered agent and office is:
(ç	Sonya L Tuten
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)
	Immokalee F1 34142 (CITY/STATE/ZIP)
at the place designate to act in this capacity	s registered agent and to accept service of process for the above stated corporation I in this certificate, I hereby accept the appointment as registered agent and agree I further agree to comply with the provisions of all statutes relating to the prope ance of my duties, and I am familiar with and accept the obligations of my position
· :	
5	SIGNATURE) 3-24-97 (DATE)