

P97000036337

TRANSMITTAL LETTER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 APR 21 PM 1:12

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

SUBJECT: INVICTA ENTERPRISES, INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$ 78.75

Filing Fee &  
Certificate

800002149128--9  
-04/21/97--01106--012  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

FROM: PETER CLAPSON  
Name (printed or typed)  
4924 U.S. HWY 19  
Address  
NEW PORT RICHEY, FL 34652  
City, State & Zip  
(813) 842-4348  
Daytime Telephone Number

NOTE: PLEASE PROVIDE THE ORIGINAL AND ONE COPY OF THE ARTICLES.

D. BROWN APR 23 1997

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## 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:

INVICTA ENTERPRISES, INC.

### ARTICLE II      PRINCIPAL OFFICE

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

4924 U.S. HWY 19  
NEW PORT RICHEY, FL 34652

### ARTICLE III      SHARES

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

500

### ARTICLE IV      INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

PETER CLAPSON  
4924 U.S. HWY 19  
NEW PORT RICHEY, FL 34652

**ARTICLE V      INCORPORATOR(S)**

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

PETER CLAPSON  
4924 U.S. HWY 19  
NEW PORT RICHEY, FL 34652

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

16 TH day of APRIL, 19 97.

Peter Clapson.  
Signature

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 APR 21 PM 1:13

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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 corporation is: INVICTA ENTERPRISES, INC
2. The name and address of the registered agent and office is:

PETER CLAPSON

(Name)

4924 U.S. HWY 19

(P.O. Box not acceptable)

NEW PORT RICHEY, FL 34652

(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Peter Clapson  
Signature

17th April 97  
Date