1000039399 TRANSMITTAL LETTER

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



*****78.75

SUBJECT:	A.F.A.B. C	HAPIN, INC.	
<u> </u>	roposed corporate r	name - must include suffix)	
		-0	02167983 5/06/9701107004 ****78.75 *****78.7
Enclosed is an original for:	and one (1) co	py of the articles of incorporation	and a check
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy & Certificate Additional Copy Required	,
FROM:	DORT	HA C. GILLIS	
	Name (printed or typed)		
	604	LAKE DOT CIRCLE #3	
		Address	•
	ORLA	NDO, FL 32801	
	Cit	ty, State & Zip	•
	(407	7) 317-9050	

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 17, 1997

DORTHA C GILLIS 604 LAKE DOT CIRCLE #3 ORLANDO, FL 32801

SUBJECT: A.F.A.B. CHAPIN, INC. Ref. Number: W97000008912

We have received your document for A.F.A.B. CHAPIN, INC.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$78.75. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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) 487-6919.

Letter Number: 097A00019462

Beth Register Corporate Specialist Supervisor

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:

A.F.A.B. CHAPIN, INC.

ARTICLE II PRINCIPAL OFFICE

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

604 LAKE DOT CIRCLE #3 ORLANDO, FL 32801

ARTICLE III SHARES

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

ONE THOUSAND (1,000) SHARES AT ONE DOLLAR (\$1.00) PER SHARE

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

DORTHA C. GILLIS 604 LAKE DOT CIRCLE #3 ORLANDO, FL 32801

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):

DORTHA C. GILLIS 604 LAKE DOT CIRCLE #3 ORLANDO, FL 32801

The undersigned inco	orporator(s) has(have) executed these Articles of Incorporation the
7th day of _	agril , 19 97.
KJ	Aortha C. Lillio Signature
	Signature
	Signature

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 corporation is:	A.F.A.B. CHAPIN, INC.	•
2. The name and address of the reg	gistered agent and office is:	
	DORTHA C. GILLIS (NAME)	TALES STE
(P.O.	604 LAKE EOT CIRCLE #3 Box or Mail Drop Box NOT ACCEPTABLE)	AY-2
	ORLANDO, FL 32801 (CITY/STATE/ZIP)	PH I
	(GII I/SIKIBZIF)	ORION ORION

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.

Sortha C. Gillies 7 agril 1997
(SIGNATURE) (DATE)