

P97000042137

TRANSMITTAL LETTER

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 MAY -8 AM 8:30

300002171850--8
-05/08/97--01119--015
*****78.75 *****78.75

SUBJECT: BLUE CHIP 2000, Inc
(Proposed corporate name - must include suffix)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: VINCENT PECORARO
Name (Printed or typed)

453 WOODSTOCK DRIVE
Address

PORT ORANGE, Florida 32127
City, State & Zip

1-407-306-2927
Daytime Telephone number

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 MAY -8 AM 8:40

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

RP
5-13 97

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:

BLUE CHIP 2000, Inc.

ARTICLE II PRINCIPAL OFFICE

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

453 WOODSTOCK DRIVE
PORT ORANGE, FLORIDA 32127

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ARTICLE III SHARES

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

1000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ALLEN BELUS
6235 PALOMINO CIRCLE
PORT ORANGE, FLORIDA 32127

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):

VINCENT PECORARO
453 WOODSTOCK DR
PORT ORANGE, FLORIDA 32127

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

25 day of APRIL, 19 97.

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

Vincent Pecoraro
Signature

Signature

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 corporation is Blue Chip 2000, Inc.

2. The name and address of the registered agent and office is:

ALLEN BELUS
(NAME)

6235 PALMWOOD CIRCLE
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

PORT ORANGE, FLORIDA 32127
(CITY/STATE/ZIP)

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IN OFFICE CORPORATION

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.

Allen Belus
(SIGNATURE)

4/25/97
(DATE)