## P97000047258

## TRANSMITTAL LETTER

FILED

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

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SUBJECT:	Chimera Ventures, Inc. (Proposed o	Orporated Orporate name - must includ	e suffix)	<del></del>
Enclosed is an original	and one(1) copy of the article		00002191: -05/27/970 *****78.75 check for:	1081005
\$70.00 Filing Fee	₹78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy  ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate	
FROM: _		Printed or typed)		J
	2422 Icecapade Dri	VE Address	<u></u>	
	Sarasota, FL 342	40 , State & Zip		

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

Daytime Telephone number

941-371-8751

9N5-29-97

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.



The name of the corporation shall be:

Chimera Ventures, Incorporated

ARTICLE II PRINCIPAL OFFICE

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

2422 Icecapade Drive, Sarasota, FL 34240

ARTICLE III SHARES

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

100

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Richard A. Vannucci 2422 Icecapade Drive Sarasota, FL 34240

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Richard Vannucci 2422 Icecapade Drive, Sarasota, FL 34240

Signature/Incorporator

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

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

5.23.57 Date

Signature/Registered Agent