P97000047874

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 DATE 5/23/97

Re:	Clayt Coffi	, Inc.
	/ (Name of Corporation)	,
		A CONTRACTOR OF CONTRACTOR OF STREET

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

FILED
97 MAY 28 PM 1: 19
3ECRETAINSSEE, FLORIDA

John C. Bryan
(Individual's Name)

Clay t Coff,
(Name of Corporation)

MAILIN	IG ADDRESS	OF CO	RPORATION —
2809	Cotal	Wo	ξ./
			33950
	PH	ONE -	
(941) 5	75-766 Number	5/	
Area Code	Number		Ext.
	311	5	-/3 A/On

	•		
ARTICLE	S OF INCORPORATION		
	of		
Claut	Coto.		
	name of corporation)		
The undersigned acting as the incorporators of a e following articles of incorporation for such corporation	corporation under the Florida Business	s Corporation A	ct, adopt(s)
The name of the corporation is:	LE I - CORPORATE NAME	SECRET/ TALLAHA	FI 97 HAY
The hand of the corporation is:	Corp.	SSE)LE
7,		<u> </u>	<u>₹ 0</u>
AD	TICLE II - DURATION	ORI ORI	
This corporation shall exist perpetually unless di		DA 3.	19
	•		
AF	RTICLE III - PURPOSE		
The corporation is organized for the purpose of conited States and the State of Florida.	engaging in any activities or business p	permitted under	the laws of t
ARTIC	CLE IV - CAPITAL STOCK		
The corporation is authorized to issue 500	shares of common stock, par value	\$ <u>/,00</u>	per sha
ARTICLE V The street address of the initial principal office a	/ - INITIAL PRINCIPAL OFFICE and, if different, the mailing address is:	:	
STREET ADDRESS 2809 Coral	Way		-
	· · · · · · · · · · · · · · · · · · ·		<u> </u>
CITY PUNTA GOFA	FLORIDA	ZIP *	<u> 33750</u>
Mailing address, if different	· · · · · · · · · · · · · · · · · · ·		
STREET ADDRESS			

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

FLORIDA

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	John	C.	Bryan		
ADDRES	2809	Cotal	Way		
CITY P	unta	Gotda		FLORIDA	ZIP 33950

CITY

ZIP

ARTICLE VII - INII	TAL BOARD OF DIRECTORS	
This corporation shall have(directors initially. The nu	
either increased or diminished from time to time by the By addresses of the initial director(s) of the corporation are as		e (1). The names and
MAR ROSSIA PAVALA		
NAME REGARE Bryan		
ADDRESS 2809 Cotal Way	STATE Flotida	ZIP 3394, O
CITY Punta Gorda	STATE Flotida	ZIP 33950
NAME PAT EVANO	1)	
ADDRESS 18200 Wind 5 WRPT	Ave	- 120110
city Port Charlotte	STATE Flotida	ZIP 33948
NAME		
ADDRESS		
CITY	STATE	ZIP
ARTICLE V	III - INCORPORATORS	
The names and addresses of the incorporators signing the	se Articles of Incorporation are as follo	ws:
NAME John C. Bryan		
ADDRESS 2809 Cotal Way	/	
city Punta Gotda	STATE Flotida	ZIP 33950
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
The undersigned incorporator(s) have executed thes	e Articles of Incorporation this	23
day of		
	John C Bryan	(Signature)
		,
	<u></u>	(Signature)

_ (Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

97 MAY 28 PH 1: 19
SECRETARY OF STATE

Clayt Corp,
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 2809 Cotal Way
Punta Gorda Fl. 33950
has named John C. Bryan

located at the aforesaid address, as its registered agent to accept service of process within this state.

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.

John Chrysn (Signature) 5/23/97 (Date)