19700050350

TRANSMITTAL LETTER

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



		·
SUBJECT:	CAS ENTERPRISE OF TAMPA	INC
	(Proposed corporate name – must include suffix	
	• •	7 100022061753 -06/09/9701139019 *****78.50 *****78.50
Enclosed is an original a	nd one (1) copy of the articles of incorporation	and a check for :
X \$78,50 Filing 1	\$122.50 Fee & Certificate Filing Fee & Ce	rtified Copy
FROM :	ANGELIQUE SALIBA	
	2002 62nd STREET NOR	RTH
	Street Address	
	CLEARWATER FLORID	OA 34620
	City, State & zip	
	(813) 532 - 8636	
	Daytime Phone Number	
		BC (4 \ b

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

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:

CAS ENTERPRISE OF TAMPA, INC.

ARTICLE II PRINCIPAL OFFICE

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

2002 62nd STREETNORTH CLEARWATER FLORIDA 34620

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstandind at any one time is: (1000) one thousand shares of one dollar (\$1.00) par value common stock, which shall be designated "COMMON STOCK".

ARTICLE IV INITIAL REGISTEREDAGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ANGELIQUE SALIBA 2002 62nd STREETNORTH CLEARWATER FLORIDA 34620

ARTICLE V INCORPORATOR(S)

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

CHARBEL SALIBA 2002 62nd STREETNORTH CLEARWATER FLORIDA 34620 President

ANGELIQUE SALIBA 2002 62nd STREETNORTH CLEARWATER FLORIDA 34620 V.P. / TREAS

The undersigne	ed incorporator	(s) has (have) (executed these Articles of Incorporation the	nis
4th_	day of	JUNE	1997	
	131		7 / 1	
	Ja-	Mak	1/20	
	Du	Signa	Mer	
		Signa	ature	
		Signa	ature	
		Signa	ature	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

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	como	ration	is
	1110	1100110	VI 1110	COIP	,, au	13

CAS ENTERPRISE OF TAMPA, INC.

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

ANGELIQUE SALIBA

(Name)

2002 62nd STREET NORTH

(P.O.BOX "not" accepted)

CLEARWATER FLORIDA 34620

(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 the 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.

Signature Date