# 9700000077

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

900002249628--7 -07/28/97--01148--012 \*\*\*\*122.50 \*\*\*\*122.50

<del></del>	(Proposed o	corporate name - must include	suffix)	
Enclosed is an original	and one(1) copy of the article	es of incorporation and a cl	heck for:	1
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	1008 Cam	-0136 / (813) 69	763-7 - 1707 - 1	FILED 97 JUL 28 /4 8 15
Brady Rhinhart	Daytime GAVE	Telephone number		
OOR EXAM AN	PHONE T			QN 7-31-97
N	OTE: Please provide the	original and one copy of	the articles	YI''

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

West Coast Relocation, Inc.

## 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.

### ARTICLE I NAME

The name of the corporation shall be:

West Coast Relocation, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

1008 Cameo Crest In Valrico, FL. 33594

### ARTICLE III SHARES

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

one

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Brady M. Rhinhart 1008 Cameo Crest Ln.

Valrico, FL 33594

# **INCORPORATOR**

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

Brady M. Rhinhart 1008 Cameo Crest In. Valrico, FL. 33594

(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

see above signature

Signature/Registered Agent