

P97000067750

TRANSMITTAL LETTER

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

800002257218--6  
-08/04/97--01168--008  
\*\*\*131.25 \*\*\*131.25

SUBJECT: Mountain Laurel 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: Brian Storch  
Name (Printed or typed)

1450 Duff Rd.  
Address

Lakeland, FL 33810  
City, State & Zip

(941) 858-4261  
Daytime Telephone number

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DIVISION OF STATE  
CORPORATIONS

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

## 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: *Mountain Laurel Inc.*

### ARTICLE II PRINCIPAL OFFICE

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

*1450 Duff Rd.  
Lakeland, FL 33810*

### 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 Florida street address of the initial registered agent are:

*Brian Storch 1450 Duff Rd  
Lakeland, FL 33810*

### ARTICLE V INCORPORATOR

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

*Brian Storch 1526 Duff Rd Lakeland, FL 33810*

*Brian Storch*  
Signature/Incorporator

*Brian Storch*

*8-1-97*

*8-1-97*

Date

(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

*Brian Storch*  
Signature/Registered Agent

*8-1-97*

Date

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