# 7000076251

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 97 SEP -2 PM 3: 41

SUBJECT: THE PEOPLE	ES PARTNERSHIP, INC.	
	posed corporate name - must include suffix)	
Enclosed is an original and for:  [XX] \$70.00	d one (1) copy of the articles of incorporation a \$78.75 \$122.50 \$131.25 アロロロロ -09/****	nd a check 2282007—3 02/97—01036—007 **70.00 *****70.00
FROM:	THE PEOPLES PARTNERSHIP, INC.  Name (printed or typed)	
	639 RAMONA LANE #1 Address	
	ORLANDO, FL 32805	
	City, State & Zip	•
	(407) 843-9582	_

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

Daytime Telephone number

### 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 | NAME

The name of the corporation shall be:

- THE PEOPLES PARTNERSHIP, INC.

#### ARTICLE II PRINCIPAL OFFICE

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

639 RAMONA LANE #1 ORLANDO, FL 32805

#### ARTICLE III SHARES

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

1,000

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ELLIOTT BARBER 639 RAMONA LANE #1 ORLANDO, FL 32805

#### ARTICLE V INCORPORATOR(S)

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

ELLIOTT BARBER 639 RAMONA LANE #1 ORLANDO, FL 32805

The u	ndersigned i	ncorporator(s)	has(have) execut	ed these Articles of Incorporation th
	_26	day of	AUGUST	, 19 <u>97</u> .
ę.		Eleists	- Barke Signature	
			Signature	
		<del></del>	Signature	

Articles of Incorporation Filing Fee - \$35

# 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. Th	ne name of the corporation is: THE PEOPLES PARTNERSHIP. INC.	<del></del>	
• .			
2., TI	he name and address of the registered agent and office is:	97	
	ELLIOTT BARBER	7 SEP	
	(Name)	\\ \frac{1}{\sigma} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
	639 RAMONA LANE #1	P	125
	(P.O. Box not acceptable)	<u>.</u> ب	5 <u>-</u> 4
	ORLANDO, FL 32805	<del>=</del> .	1 =
	(Cin/State/7in)		

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.

Elevater Barbon 8/26/97