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((H97000016726 6))

TO: DIVISION OF CORPORATIONS
(850) 922-4001

FAX #:

FROM: AL CLARK
072100000173

ACCT#:

CONTACT: AL CLARK
PHONE: (813) 393-1766
(813) 528-7222

FAX #:

NAME: CAPABLE CABLE INC.

AUDIT NUMBER.....H97000016726

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0

PAGES..... 3

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B. McKnight OCT 0 8 1997

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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
CAPABLE CABLE INC.

ARTICLE II PRINCIPAL OFFICE

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

475 PALM AVE
ST PETERSBURG
FL 33703

ARTICLE III SHARES

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

1000 SHARES
NO PAR

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:
prepared by:

Name: **Kraig Kupersmith**

Address: **475 Palm Ave**

ST PETERSBURG FL

Ph#

33703

813-522-9614

Accounting & Tax Help, INC.
8668 PARK BLVD Suite A
SEMINOLE, Florida 33777

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TALLAHASSEE, FLORIDA

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ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

KRAIG KUPERSMITH
475 PALM AVE
ST PETERSBURG FL 33703

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this

8 day of OCTOBER, 1997.

(An additional article must be added if an effective date is requested.)

x 
Signature_____
Signature_____
Signature**Notarization is not required****NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

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**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 corporation is: CABLE CABLE
INC.

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

Accounting & Tax Help, INC.
(Name)

8668 PARK BLVD., Suite A
(P.O. Box not acceptable)

SEMINOLE, Florida 33777
(City/State/Zip)

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TALLAHASSEE, FLORIDA

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.

RL Clear
(Signature) *President*

10-8-97

DIVISION OF CORPORATIONS, P.O. BOX 6227, TALLAHASSEE, FL.

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