POTALIA LETTER DE LE FLETZ 97. OCT. 20 MI ID: 08 TALLAHASSEE, FLORIDA

Department of State Division of Corporations

P. O. Box 6327 Fallahassee, FL 32314	•			
SUBJECT:	gua Down I	7C . ate name - must include suff	īx)	a _g
		8	00002324 -10/20/976 ****131.25	-0080 01078002 ****131.25
Enclosed is an original and	d one(1) copy of the articles	s of incorporation and a c	heck for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy	S\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	l l
FROM:	Andrew D. Name (P.	Williams rinted or typed)		-
`	8676 1	Vindy Circle		
	_	Address each, FL 33 State & Zip	3437	
		77 - 9843 Telephone number		

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

ARTICLES OF INCORPORATION

FILED

97 OCT 20 AH ID: 08

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE	T	NAME
MRT I I ULL		TANTANA

The name of the corporation shall be:

Agua Down, Inc.

ARTICLE II PRINCIPAL OFFICE

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

8676 Windy Circle , Boynton Beach, FL 33437

ARTICLE III SHARES

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

250

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Andrew D. Williams 8676 Windy Circle

ARTICLE V INCORPORATOR

Boynton Beach, FL 33437

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

Andrew D. Williams

8676 Windy Circle

Boynton Beach, FL 33437

Signature/Incorporator

(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

Signature/Registered Agent

10 19 95