

P97 0000 91588

TRANSMITTAL LETTER

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

600002327636--7
-10/23/97--01030--004
****131.25 ****131.25

SUBJECT: MIS PROPERTIES, 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: MICHAEL R. DOUGHERTY
Name (Printed or typed)

3104 W JEAN STREET
Address

TAMPA FLORIDA 33614
City, State & Zip

813-815-6530
Daytime Telephone number

FILED
97 OCT 23 PM 12:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/24/97-74M
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: *MIS PROPERTIES, INC.*

ARTICLE II PRINCIPAL OFFICE

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

*3104 W JEAN ST
TAMPA FLA 33614*

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

*MICHAEL R. DOUGHERTY
3104 W JEAN STREET
TAMPA FLA 33614*

ARTICLE V INCORPORATOR

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

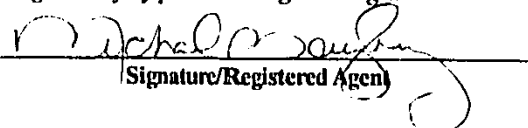
*MICHAEL R. DOUGHERTY
3104 W JEAN STREET
TAMPA FLA 33614*


Signature/Incorporator

10-1-97
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


Signature/Registered Agent

10-1-97
Date

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