

P 980000010660

TRANSMITTAL LETTER

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

FILED
98FEB-2 PM12:26
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SUBJECT: NATCHES WAY CORPORATION
(Proposed corporate name - must include suffix)

4000002419054--4
-02/02/98--01135--004
****131.25 ****131.25

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: NATCHES WAY CORPORATION
Name (Printed or typed)

3600 MYSTIC POINTE DRIVE #1406
Address

AVENTURA, FL 33180
City, State & Zip

(305) 858-5800
Daytime Telephone number

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

2-3-98
mm

**ARTICLES OF INCORPORATION
OF
NATCHES WAY CORPORATION**

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

The name of the corporation (hereinafter called the "Corporation") is Natches Way Corporation

ARTICLE II

The principal place of business and mailing address of the Corporation is 3600 Mystic Pointe Drive #1406, Aventura, Florida 33180.

ARTICLE III

The Corporation is authorized to issue 100 shares of stock.

ARTICLE IV

The name and Florida street address of the initial registered agent of the Corporation is Paul B. Hilf, 3600 Mystic Ponte Drive #1406 Aventura, Florida 33180.

ARTICLE V

The name and address of the incorporator to these Articles of Incorporation is Paul B. Hilf, 3600 Mystic Pointe Drive #1406 Aventura, Florida 33180.



Incorporator



Date

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.



Registered Agent



Date

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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