

P98000046010

TRANSMITTAL LETTER

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

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-05/21/98--01003--009
***122.50 ***122.50

SUBJECT:

N.C.C.A., INC.

(Proposed corporate name-must include suffix)

Enclosed is an original and one(1) copy of the articles
of incorporation and a check for:

<u>\$70.00</u>	<u>\$78.75</u>	<u>\$122.50</u>	<u>\$131.25</u>
Filing fee	Filing fee	Filing fee	Filing fee,
	&Certificate	&Certified copy	Certified copy
			& Certificate

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAY 21 PM 1:54

FROM:

N.C.C.A., INC. LISA BRADNICK
Name (printed or typed)

5448 HOFFNER AVE. STE. 405
Address

ORLANDO, FL. 32822
City, State & Zip

407-382-8001
Daytime Telephone number

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

5/21
W98-11364

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:

N.C.C.A., INC.

ARTICLE II PRINCIPAL OFFICE

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

5448 HOFFNER AVE. STE. 405
ORLANDO, FL 32822

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:

LISA BRADNICK
4607 ALRIX DR.
ORLANDO, FL 32839

ARTICLE V INCORPORATOR

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

RON TRIDICO
5448 HOFFNER AVE. STE. 402
ORLANDO, FL 32822

Signature/Incorporator

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

Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAY 21 PM 1:54


Signature/Registered Agent

5/13/98
Date