# P9800046852

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

40002531454---5 -05/21798--01055--005 \*\*\*\*\*78.75 \*\*\*\*\*78.75

JBJECT:	(Proposed corporate name - must include suffix)				
			,		
closed is an origina	al and one(1) copy of the article	s of incorporation and a	check for :		
\$70.00 Filing Fee	Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate		
•		ADDITIONAL COPY REQUIRED			
FROM:	Wade Smith			<b>-</b> 98	
	Name (Printed or typed)		À.	98 MAY 21	
	324 Sunset Road			는 <u>2</u>	4
	Address Frostproof, FL 33843		E, FLORIC	PM 3: 39	Control of the contro
	<b>City, State &amp; Zip</b> 941-635-4266				
	Daytime Telephone number				

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.

### <u>ARTICLE I NAME</u>

The name of the corporation shall be:

Eclectic Artists, Inc.

## ARTICLE II PRINCIPAL OFFICE

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

324 Sunset Road Frostproof, FL 33843

PO Box 986

Frostproof, FL 33843

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:

Wade Smith 324 Sunset Road Frostproof, FL 33843

### ARTICLE V INCORPORATOR

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

Wade SMith 324 Sunset Road Frostproof, FL 33843

Signature/Incorporator

5-13-98

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

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Date