TRANSMITTAL LETTER

P98000064850

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

SUBJECT:	CL	AUDE R. S	orporate name - must include suff	fix)	· ··
			900	0002594 -07/21/980 ******78.75	409—2 1086—007 *****78.75
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:					
□ \$7 Filing		\$78.75 Filing Fee & Certificate	Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	
			ADDITIONAL COPY	REQUIRED	
FROM: CLAUDE R. SMITH Name (Printed or typed)					
8966 S.W. 52ED STREET Address					
COOPER CITY FLORIDA 33328 City, State & Zip					
		954-328-69°	84		

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

ARTICLES	OF	INCORPORATION
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The undersigned incorporator, for the purpose of forming a corporation under the Florida

Business Corporation Act, hereby adopts the following Articles of Incorporation. The name of the corporation shall be: CLAUDE R. SMI

ARTICLE II	PRINCIPAL	OFFICE

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

52ED STREET

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

ARTICLE IV INITIAL REGISTERED AGENTH The name and Florida street address of the initial registered actions of the initial registered actions.	T AND STREET ADDRESS
0766 S.W. 52 51KEE1	
COOPER CITY FLORIDA 33328)
ARTICLE V INCORPORATOR	· · · · · · · · · · · · · · · · · · ·
The <u>name and address</u> of the incorporator to these Articl	es of Incorporation are: AUDE R.SMITH
8966 S.W. 5ZED STREET COOPER CITY FLORIDA 33328	The state of the s
COOPER CITY FLORIDA 33328	en e
Soulle R Sunt	7-20-98
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