

TRANSMITTAL LETTER

P 9 8 0 0 0 1 0 5 3 7 3

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

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-12/17/98--01114--002  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

c u s

SUBJECT: MONEY MAILER OF SW BROWARD COUNTY, 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 of Status

☐ \$78.75 Filing Fee & Certified Copy

☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

98 DEC 17 AM 8:08  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FL 32304

FROM: Lois Gotti  
Name (Printed or typed)

7561 NW 59th Way  
Address

Parkland, FL 33067  
City, State & Zip

954-227-5804  
Daytime Telephone number

198 59687

F. CHESSEB DEC 21 1998

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

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## 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:

*Money Mailer of SW Broward County, Inc.*

### ARTICLE II PRINCIPAL OFFICE

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

*7561 NW 59<sup>th</sup> Way  
PARKLAND, FL 33067*

### ARTICLE III SHARES

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

*10*

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

*Lois Gotti  
7561 NW 59<sup>th</sup> Way, PARKLAND, FL 33067*

### ARTICLE V INCORPORATOR

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

*Lois Gotti  
7561 NW 59<sup>th</sup> Way, PARKLAND, FL 33067*

*Lois Gotti*

Signature/Incorporator

*Lois GOTTI*

*12-13-98*

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

*Lois Gotti*

Signature/Registered Agent

*12-13-98*

Date

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TALLAHASSEE, FLORIDA