RANSMITAE REFERENCE DE SECTION DE LA CONTRACTION DE LA CONTRACTION

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

SUBJECT:	CHLANUID S.C	·· TMC.		
	(Proposed corpor	ate náme - must include su	ffix)	
Enclosed is an or	iginal and one(1) copy of the articles	s of incorporation and a	check for :	_
☐ \$70.0 Filing Fe		□\$122.50 Filing Fee & Certified Copy	□ \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FRO	M: TREUOR W Name (P)	PRICE, &	ns.	• • •
	3645 JERTCH	AD DR	SECF TALL/	ر 99
	CASSEL BERRY	1 · 3270	NETARY OF	JAN 19 PH
	(407) 695 - Daytime T	OOGU elephone number	FLORIDA	2:46

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.

ARTICLE I NAME		
The name of the corporation shall be:		
ORLANDO S.C., INC.		
ARTICLE II PRINCIPAL OFFICE		
The principal place of business and mailing address of this corporation shall be:		
20205 S.R. 520		
00 000 5 7 27827		
ORLANDO, FC., 32833.		
	ne time is:	
The number of shares of stock that this corporation is authorized to have outstanding at any on		
100		
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS	•	
The name and Florida street address of the initial registered agent are:		
TREUDR W. PRYCE, SAUR.	99 JAN 19 SECRETAR TALLAHASS	
2 CIVE TERICHE IV	CR A	1 1
CASSELSE MRY, FC. 32701.	HE N	Carriery Carriery
The name and address of the incorporator to these Articles of Incorporation are:	SSI SSI	2
	그의 로	
TREVOR W. PRYCE, CMC	2: 46 STATE FLORID	
3645 JERTCHO M.	RH 45	
CASSELBERRY, FL. 32707.	I >-	
1-14-99		
Date		
Signature/Incorporator		
V		

(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. Thereby 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