P9900006326

Telephone Number

TRANSMITTAL LETTER

Department of State

Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

SUBJECT: Acticles of Incorporation for Virginia Vort's Shipn-Mail Inc.

I enclose an original and _____ copy(ies) of the Articles of Incorporation for the above corporation and a check in the amount of \$ 70°

From:

Virginia Vort's Shipn-Mail Inc.

I enclose an original and ____ copy(ies) of the Articles of Incorporation for the above corporation and a check in the amount of \$ 70°

From:

Virginia A. Vort

Address

Addr

SECKLINAY OF STATE

NI AHASSEE FLOBINA

SECKLINAY OF STATE

No street

ARTICLES OF INCORPORATION

Virginia Vat's SHIP-N-MAIL INC.

ARTICLE I NAME

The name of the corporation shall be: Virginia Vogt's SHIP-N-MAIL INC.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this
corporation shall be:
975 Imperial Golf Course Blud Suite 119 Naples 71 34110
ARTICLE III CAPITAL STOCK The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 5100^{2} Shares Af dollar Each.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:
Virginia Vosts SHIP-N-MAIL INC
975 Golf Course Blud. Suite 119
Naples 41 34110
ARTICLE V INCORPORATOR
The name and street address of the incorporator to these
Articles of Incorporation is:
Virginia Vogt's SHIP-N-MAIL INC
975 Golf Course Blud Suite 119
Naples 41 34110
The undersigned has executed these Articles of Incorporation
this 16th day of JANUACY 1999.
Uning a Use Incorporator
Incorporator

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida. 1. The name of the corporation is: SHIP-N-MAIL INC. 2. The name and address of the registered agent and office is: VICGINIA Vocat 975 Golf Course Blud Suite 1A

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.

Date: