P99900010752

TRANSMITTAL LETTER

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

500002760105--8 -02/01/99--01090--008 ******87.75 ******87.75

| SUBJECT: | NOFAL INC. | | |
|------------------------------------|--|--------------------------|-----------------------|
| Enclosed is an original and one (I |) copy of the articles of incorporation and our cl | heck for \$ <u>87.75</u> | - * |
| FROM: | ROBERT C NOFAL | _ . . | - <u>-</u> - <u>-</u> |
| | ORMOND BEACH, FL 32174 | = | SECRETAR VISION OF |
| | (904) 673-5657 | · .: | LED STAT |

Note: Please provide the original and one copy of the Articles.

837

ARTICLES OF INCORPORATION OF

| NOFAL, INC | |
|---|-------------------|
| The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Co Act, hereby adopt(s) the following Articles of Incorporation. | rporation |
| ARTICLE I NAME | NIG |
| The name of the corporation shall be: NOFAL, INC. | SORTAR 99FEB - |
| ARTICLE II PRINCIPAL OFFICE | CARPO CARPO |
| The principal place of business and mailing address of this corporation shall be: 12 Shawnee Trail, Ormond Beach, Florida 32174 | RATIONS 1:35 |

ARTICLE III SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: Robert C Nofal 12 Shawnee Trail Ormond Beach, Florida 32174

ARTICLE V INCORPORATE(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Robert C Nofal 12 Shawnee Trail Ormond Beach, Florida 32174

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this _

State of Florida County of Volusia

The foregoing instrument was acknowledged before the this Jan 19999 by Robert C NoFal who is personally known to me. Did hot take on

Signature

Signature

P.A. CURLEY MY COMMISSION # CC 653988 EXPIRES: June 9, 2001 Bonded Thru Notary Public Underwriters Articles of Incorporation Filing Fee \$

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

| The name and address of t | he registered agent and office is: | = | | FEB - |
|---------------------------|------------------------------------|-------------|---------------------------------------|------------|
| | ROBERT C. NOFAL | | | 一 P |
| | (NAME) | | <u> </u> | - IK |
| | 12 SHAWNEE TRAIL | | | မှား မာ |
| ~ | (P.O. BOX NOT ACCEPTABLE) | | - | |
| | ORMOND BEACH, FLORIDA 32174 | 140A - 1-10 | · · · · · · · · · · · · · · · · · · · | _ |
| | (CITY/ STATE/ZIP) | | | |

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 APPIONTMENT 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 AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

State of Florida County of Volusia The foregoing instrument was acknowledged before me this Jan 19,1999 by Robert C Notal whois personall Known to me. Did not take an oath.

