

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 60095/7<mark>95970555</mark>-008 \*\*\*\*\*\*70.00 \*\*\*\*\*\*70.00

SUBJECT: The (Pro	e FINA posed corporate n	ame - must include suf	INC.		
Enclosed is an original ar for : \$70.00 [ Filing Fee	nd one (1) copy \$78.75 Filing Fee & Certificate	of the articles of i  \$122.50  Filing Fee & Certified Copy	ncorporation ar stantage		
FROM:	June Name 148	MAGGY (printed or typed)  Woods IDE  Address	Dr.	99 FEB - 1 PM 3- SECRETARY OF STAT TALLAHASSEE, FLORE	FILED
	407-	y, State & Zip - Q59 - Q Telephone number	762	26 Ze	
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NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

THE FINAL D, TWC.

ARTICLE II PRINCIPAL OFFICE

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

SATENITE BOAT TO

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

JUNE MAGGIO DR.
148 WOODSIDE DR.
MEIBOURNE, FL. 32940

The name and address of the initial registered agent is:

## ARTICLE V INCORPORATOR(S)

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

JUNE MAGGIO 148 WOODSIDE DR. ME/BOURNE, FL. 32940

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

29th day of JANUARY, 1999.

Signature

Signature

Articles of Incorporation Filing Fee - \$35

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE.

PURSUANT TO THE PROVISIONS OF SECTION 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 of the corporation is:		
<b>.</b>	we.	<del></del>
2. The name and address of the registered agent and office is:		
JUNE MAGGIO (Name)	99 SECI	
148 WoodsIDEDK.	FEB -1 RETARY AHASSE	FIL
(P.O. Box not acceptable)  MEBOURNE, FL. 32940	PN 3	
(City/State/Zip)	<b>≅</b> ∃ \	

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.

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June Margio 1-29-99 (Date)