P9900013824

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

P. O. Box 6327 Tallahassee, FL 323	14		_	
SUBJECT:	CALL SANT	Porate name - must include st		
		-	50000277; -02/10/99- *****78.75	-0108600
Enclosed is an origin	nal and one(1) copy of the arti	cles of incorporation and a	a check for:	l
\$70.00 Filing Fee	■\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL C	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	
FROM:	FROM: MIKE L. TISSIER DE 99 Name (Printed or typed)			
Name (Printed or typed) 9700 Green Cear CT Address FT. Myers FL 33979 RESTANCE STANCE STANC				2 10 M 8: 2
	94)	ry, State & Zip - 481-220 e Telephone number	≯	

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:	PANTA CLAUS, INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this confidence of the Confidence of	<u> </u>
ARTICLE III SHARES The number of shares of stock that this corporation is authority	
100,000	. =
The name and Florida street address of the initial registered a MIKE L. TISSIER 9100 Greenleaf CT. FT. MYERS, FL. 33919 ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles MIKE L. TISSIER 9100 Greenleaf CT. FT. MYERS, FL. 33919 Mule L. L. Signeture/Incorporator	gent are:
Signature/Incorporator	Date
(An additional article must be added i	f an effective date is requested.)
Having been named as registered agent and to accept service of process certificate, I hereby accept the appointment as registered agent and ag provisions of all statutes relating to the proper and complete perfor obligations of my position as registered agent	ree to act in this capacity. I further agree to comply with the
Mule Juise	1-8-99 Nata
Signature/Registered Agent	Date