POPOLOGO ZISTES 75

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

SUBJECT:		Coralwin Corpor			
Sobject		(Proposed corporate name - must include suffix)			
			41	00002794 -03/04/990 *****87.50	9243 1087018 *****87.50
Enclosed is an o	origina	al and one(1) copy of the article	es of incorporation and a	check for:	
☐ \$70.6 Filing Fo		□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: Joseph R. Winstead Name (Printed or typed)					1.5%
	630 SW 49th Lane Address				 5
		Cape Coral, Fi	Lorida 33914 State & Zip	<u> </u>	SECRETA VISION OF

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

540-8936

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.

NAME ARTICLE I

The name of the corporation shall be:

Coralwin Corporation

PRINCIPAL OFFICE

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

1616 W. Cape Coral Parkway

Suite 171

Cape Coral, Florida
II SHARES 33914

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

(1,000)One Thousand

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

John Charles Gallagher, CPA

3501 Del Prado Boulevard, Suite 204

Cape Coral, Florida 33904

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Joseph R. Winstead 630 SW 49th Lane

Cape Coral, Florida

2426/99

Date

(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, 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 flagues 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

2/26/99

Date

Signature/Registered Agent