MAR -8 PM 2/22

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

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99 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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			4444401°ON		
SUBJECT:	DDIA DDINGING	CDADUTCC TNO			
SUBJECT: REMO PRINTING & GRAPHICS, INC. (Proposed corporate name - must include suffix)					
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:					
\$70.00	\$78.75	□ \$78.75	№ \$87.50		
Filing Fee	Filing Fee	Filing Fee	Filing Fee,		
	& Certificate of Status	& Certified Copy	Certified Copy		
			& Certificate of		
			Status		
		ADDITIONAL COP	Y REQUIRED		
			1		
~~ ^1					
FROM: Sandra Drach Name (Printed or typed)					
Name (Finned of typed)					
5475 115 Ave N.					
Address					
	Clearwater, FL	33760			
City, State & Zip					
(-0-)					
	(727)57 3 – 7 3 7 9				
Daytime Telephone number					

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

P Hall

ARTICLES OF INCORPORATION

The undersigned incorporator, for the pur Business Corporation Act, hereby adopts:			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			99 MAR -8 PM 2: 22
<u>ARTICLE I NAME</u>			BY OF STATE
The name of the corporation shall be:	REMO PRINTING &	GRAPHICS,	INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OF The principal place of business and ma		oration shall be:	
• • •	5475 115 Ave N. Clearwater, FL	33760	
ARTICLE III SHARES The number of shares of stock that this	s corporation is authorized	to have outstand	ding at any one time is:
1,000			
	STERED AGENT AN		<u>DDRESS</u>
The name and Florida street address of	f the initial registered agen	it are:	-
	Sandra K. Drach 11750 Laurel Cak Parrish, FL	Ln. 34219	
ARTICLE V INCORPORATO	OR		
The name and address of the incorpo	rator to these Articles of I	ncorporation are	
	Sandra K. Drach 11750 Laurel Oak Parrish, FL	Ln. 34219	
Sandrak Drach		3	-1-99
Signature/Incorporator			Date
(An additional a	rticle must be added if an e	effective date is	requested.)
Having been named as registered agent and this certificate, I hereby accept the appointment the provisions of all statutes relating to the pobligations of my position as registered agent	ent as registered agent and agr proper and complete performa	ree to act in this cap nce of my duties, a	pacity. I further agree to comply with and I am familiar with and accept the
Sandrak Drach		6	3-1-99
Signature/Registered Agent			Date