TRANSMITTAL LETTER

## P99000033512

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

SUBJECT:	17-0170 1001 (Proposed corpor	rate name - must include suf	1541/5, ffix)	Do.	
	<del></del>	· . · . · . · . · . · . · . · . ·	nnnn2833 -n4708/990 *****78.75	3170 1072009 *****78.75	
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :					
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$3\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	Name (Pr	inted or typed)  Address	Blu,	À,	
	City,	State & Zip	335//		
no 199 4/13/19	Daytime Te	elephone number	SECRETARY OF STAT	F11_ED	

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

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ARTICLES	OF	<b>INCORPORATION</b>

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

FILED

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SECRETARY OF STATE ALLAHASSEE, FLORIDA
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(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 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

Signature/Registered Agent

7-3/-7

Date