

TRANSMITTAL LETTER

P990000 4/670

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

500002860915--9
-05/03/99--01138--004
*****87.50 *****87.50

SUBJECT: Anderson Capital Advisors, 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
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: William Kurt Anderson
Name (Printed or typed)

7563 Philips HWY - 212 Waterside BLDG
Address

Jacksonville, FL 32256
City, State & Zip

904-281-0566
Daytime Telephone number

FILED
99 MAY -3 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dmc
5/7/99

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:

Anderson Capital Advisors, Inc.

ARTICLE II PRINCIPAL OFFICE

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

7563 Philips HWY
STE 212 Waterside BLDG
Jacksonville, FL 32256

ARTICLE III SHARES

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

3,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

William Kurt Anderson
7563 Philips HWY - 212 Waterside BLDG
Jacksonville, FL 32256

ARTICLE V INCORPORATOR

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

William Kurt Anderson
7563 Philips HWY
STE 212 Waterside BLDG
Jacksonville, FL 32256


Signature/Incorporator

Apr 23, 1999
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 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

Apr 23, 1999
Date

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA