

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

SUBJECT:	C Brown -	+ CO. rate name - must include suf	fix)	_
	(Froposed corpo		-05/12/9 3 -05/12/99-	21726 -01018013 0 *****87.50
Enclosed is an origin	nal and one(1) copy of the article	es of incorporation and a	check for:	
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	PY REQUIRED	
FROM	Name (P.	cinted or typed)	<u> </u>	
	1940 FREN	ZE DR	<u> </u>	
	(407) 855-58		SECRETARY OF STATE TALLAHASSEE, FLORID	FILED 99 MAY 12 PM 2: 04

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

5/19

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:
The name of the corporation shall be: K C Brown + CO
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
1940 FRENZE DEIVE APOPKA, FLORIDA 32703
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
1 million
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
KARL BROWN_
1940 FRENZEI DRIVE
KARL BROWN 1940 FRENZEI DRIVE APOPKA, FLORIDA 32703 ARTICLE V INCORPORATOR
ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:
KARL BROWN 1940 FRENZE! DRIVE APOPKA FLORIDA 32703
APODKA FLORIDA 32703
Kand Brow 5/3/99
Signature/Incorporator 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 this certificate, I hereby accept the appointment as registered agent and agent the provisions of all statutes relating to the proper and complete performance.	ree to act in this capacity. I further agree to comply with
obligations of my position as registered agent	5/3/99
Signature/Registered Agent	Date