

**P99000059103**

CAPITOL SERVICES d/b/a  
PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)  
1406 Hays Street, Suite 2  
(Address)  
Tallahassee, FL 32301 (904) 656-3992  
(City, State, Zip) (Phone #)

OFFICE USE ONLY

400002919594--4  
-06/30/99--01044--024  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. Gold Well Associates I, Inc.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

Walk in     Pick up time 6/30     Certified Copy  
 Mail out     Will wait     Stamped Photocopy     Certificate of Status

FILED  
99 JUN 30 PM 12:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED  
99 JUN 30 AM 11:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Examiner's Initials

# State of Florida

## Articles of Incorporation

FILED  
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99  
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TALLAHASSEE, FLORIDA

### ARTICLE I:

The name of the corporation shall be: **GOLD WELL ASSOCIATES V, INC.**

### ARTICLE II:

The address of the principal office and the mailing address shall be:

**2890 Sea Pines Circle West Clearwater, Florida 33761**

### ARTICLE III:

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

**200 Shares with no par value**

### ARTICLE IV:

The name and address of the initial registered agent is:

**John Chigos 2890 Sea Pines Circle West Clearwater, Florida 33761**

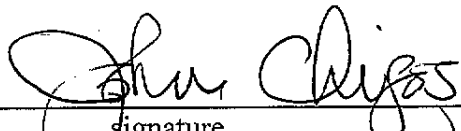
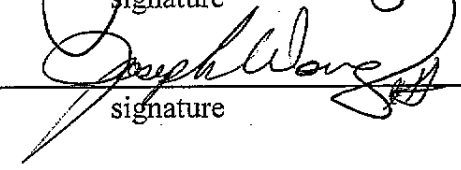
### ARTICLE V:

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

**John Chigos 2890 Sea Pines Circle West Clearwater, Florida 33761**  
**Joseph Wong 5 Division Street 2/F New York, NY 10002**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this:

**Twentieth Day of June, 1999**

  
signature  
  
signature  
signature

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

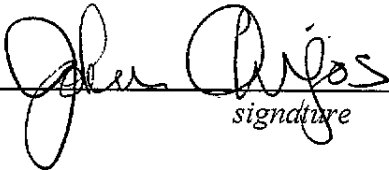
PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

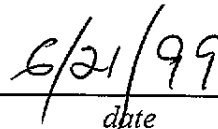
1. The name of the corporation is **GOLD WELL ASSOCIATES V, INC.**
2. The name and address of the registered agent and office is:

**John Chigos**  
**2890 Sea Pines Cricle West**  
**Clearwater, Florida 33761**

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*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

  
date