## 10064813 - Form 1 Transmittal Letter

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TALLAHASSEE, FLORIDA

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

Counter - Fitters INC.

(Proposed corporate name - must include suffs) 000293

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

□ \$122.50

**\$131.25** 

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Robert W. Cample!

460 E. Crisafulli Kd.
Address

Mennith Island FL, 32953 City, State & Zip

407 459 0322

Daytime Telephone number

# 407-454 - 2201

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

## ARTICLES OF INCORPORATION

1. The name of the corporation shall be: Counter-Fitters INC,
2. The principal place of business and mailing address of the corporation is: 460 East Crisa Full: Road, Mennith Island FL. 32953
3. The corporation shall have the authority to issue shares of stock.
4. The registered agent of the corporation is Robert W. Campbellind the registered street address is 460 E. Crisafulli Rd. Merritt, Florida 32953.
5. The initial Board of Directors shall have 3 member(s) whose name(s) and address(es) is/are as follows: Robert W. Campbell (President)  Mayra R. Campbell (Vice President / Treasurer)  Janin P. Campbell (Seene tary)  These shall be Officers as well as directors
These shall be Officers as well as directors The number of directors may be raised or lowered by amendment of the bylaws of the
corporation but shall in no case be less than one.
6. The incorporator of this corporation is Robert W. Campbell whose street address is 460 E. Crisafulli Rd. Menrith Island
FL. 32953
Dated 7-7-99
Incorporator Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 7-7-99

Legistered Agent

Registered Agent

Registered Agent

Registered Agent

Registered Agent

Registered Agent