Division of Corporations

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Florida Department of State

Division of Corporations

Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)922-4001

Account Name : DAVID SILVERMAN, ESQ.

Account Number : I19990000080 : {305}947-5822 Phone

Fax Number : (305)947-5823

FLORIDA PROFIT CORPORATION OR P.A.

Chabo Concepts, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

N. CULLIGAN SEP 1

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

CHABO Concepts, Inc.

ARTICLE II PRINCIPAL OFFICE

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

SEP -1 PH 2: 10 REJARY OF STATE AHASSEE, FLORIDA

749 E. Lehigh Dr. Deltona, Fl. 32738

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DAVID SILVERMAN, ESQ. 1591 N.E. MIAMI GARDENS DR., #214A NORTH MIAMI BEACH, FL 33179 Charlene Bowman 749 E. Lehigh Dr. Deltona, Fl. 32738

(365)9475822 FL, BAR # 0086517

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ARTICLE VI DIRECTOR(S) OFFICER(S) SHAREHOLDER(S)

The name(s) and street address(es) of the director(s) are:

Charlene Bowman 749 E. Lehigh Dr. Deltona, Fl. 32738

The name(s) and street addresses of the officer(s) are:

Charlene Bowman, President and Secretary 749 E. Lehigh Dr. Deltona, Fl. 32738

The name(s) of the shareholder(s) are:

Charlene Bowman (100 shares) 749 E. Lehigh Dr. Deltona, Fl. 32738

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ARTICLE V INCORPORATOR(S)

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

Charlene Bowman 749 E. Lehigh Dr. Deltona, Fl. 32738

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

24 day of any 1999

x Charlene Bownian
Signature

Notarization is not required.

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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:

CHABO Concepts, Inc.

2. The name and address of the registered agent and office is:

Charlene Bowman 749 E. Lehigh Dr. Deltona, Fl. 32738 99 SEP -1 PM 2: 10
SECKETARY OF STATE
TALL AHASSIE, FLORID

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.

Notarization Is Not Required

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL. 32314

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