

P99000087763

TRANSMITTAL LETTER

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

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-10/01/99--01055--019
*****78.75 *****78.75

SUBJECT: CONTRACT PACKAGING, 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
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: M. STAMPER
Name (Printed or typed)

8 NORTH DOLLINS AVE
Address

ORLANDO FL 32805
City, State & Zip

(407) 481-2214
Daytime Telephone number

99 OCT - 1 AM 11:15
FILED
DEPT. OF STATE
TALLAHASSEE, FLORIDA

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

*
I sent my
all costs
going in for
under signature
which are not.

CB
10529
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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:

CONTRACT PACKAGING, INC.

ARTICLE II PRINCIPAL OFFICE

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

8 NORTH DOLLINS AVE SUITE #22
ORLANDO FL 32805

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 Florida street address of the initial registered agent are:

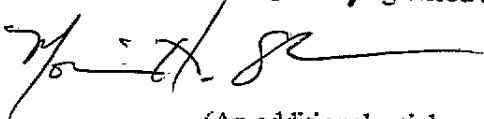
M. STAMPER 8 N. DOLLINS AVE ORLANDO FL. 32805

ARTICLE V INCORPORATOR

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

M. STAMPER
8 N. DOLLINS AVE
ORLANDO FL 32805

Signature/Incorporator/registered agent



Date

9-30-99

(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.

FILED
99 OCT - 1 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA