7999900091429 TRANSMITTAL LETTER

Department of S	tate
Division of Corp	orations
P. O. Box 6327	
Tallahassee FI	32314

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	业业企业率7月				

SUBJECT:	ROBERT WILMOTH, 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 of Status

\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: ROBERT WILMOTH INC.

Name (Printed or typed)

P.O. Box 796

Address

DAVENPORT, FL 33836
City, State & Zip

941-422-2706

Daytime Telephone number

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

10,90

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.

Diminess Corporation	*****	, o
ARTICLE I NAME The name of the corporation shall be: Robert Wi	Moth, Ix	99 OCT 13 AT SECRETARS SEC
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of business and mailing address of the principal place of the p	T, FL, 33836	ly one time is:
O O ARTICLE IV INITIAL REGISTERED AG	ENT <u>AND STREET ADDRI</u>	
The name and Florida street address of the initial registrem MELVYN R. VON SOOSTED 4685 ROSEBULST, COCOA, FL.	ered agent are:	
ARTICLE V INCORPORATOR The name and address of the incorporator to these Art MELUYD R, VON SOOSBH ROB POBL 1685 ROSEBUS S. COCOA DAOS	ticles of Incorporation are: FRET WILMOTH, FRES, KAR, 104796 P.O. J. DAVEL	LINE WILMOTH, SEC.
Melun Jerson Verston	10-7-99	PORTIFL 33836
Sognature/Incorporato	Da	te

(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 abbigations of my position as registered agent

Agnature/Registered Agent

Date