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October 11,1999

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

7009078799-570737-020 0 \*\*\*\*\*78,75 \*\*\*\*\*78.75

## Subject: Regis2000.com.inc.

## Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$78.75.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

Regis2000.com.inc.

Mailing address: Regis2000.com.inc

201 Park Place

Suite 330

Altamonte Springs, Fl 32701

FILED
99 OCT 18 PM 3: 30
SECRETARY OF STATE
TALLAHASSEE, FLORID

10, 20

## ARTICLES OF INCORPORATION

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(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME

The name of the corporation is:

REGIS 2000. COM. INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 20,000 shares of common stock, par value \$ /.00 per share

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS 201 PARK PLACE

SUITE #330

CITY ALTAMONTE SPRINGS FLORIDA ZIP 32707

Mailing address, if different

STREET ADDRESS

CITY FLORIDA ZIP

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME J. RAMON' L. FAUSTMANN

ADDRESS 1/9 EASTERN FORK RD

CITY LONGWOOD FLORIDA ZIP 32750

#### ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have THREE (3) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAMEJERAMON L. FAUSTMA	NN	
ADDRESS 119 EASTERN FORK		
CITY LONGWOOD	STATE ELORIDA	ZIP 32750-275
NAME ELISEO VILLANEUVA		
ADDRESS 19960 WOODUG	KDR	
CITY DUNNEZZON	STATE 62	ZIP 3 4432
NAME LNZVIMINDA OLIV	ERIO M.D	
ADDRESS 19960 WOODUCK A	OR	- · · · · · · · · · · · · · · · · · · ·
CITY DUNNELLON	STATE FLORIDA	ZIP 34432

### ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME REGIS SAUGER		
ADDRESS // 3 LAKE POINTE CIR	CLE	
CITY KISSIMMEE	STATE FLORIDA	ZIP 34743
NAME ELISED B. VILLANUE	/A	
ADDRESS 19960 WOODUCK DR		·
CITY DUNNELLON	STATE FLORIDA	ZIP34432_
NAME PERLITA P. OCAMPO		
ADDRESS 3901 WOOD GLADE	COVE	
CITY WINTER PARK	STATE /L.	ZIP 32792

RECIE SAUCER (Signature)

Men Éliseo B. Villan (Signature)

Was PERLITA P. OCSUPO (Signature)

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

SCORE MAN OR STATE OF THE STATE

REGIS 2000, COM, INC.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 201 PARK ALACE SUITE #330

ALTAMONTE SPRINGS, FL 32701

has named J. RAMON L. FAUSTMANN

located at the aforesaid address, as its registered agent to accept service of process within this state.

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)