## P99000092924

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

DOC. EXAM

**400003018904**--3 -10/19/99--01085--007 \*\*\*\*\*78,75 \*\*\*\*\*\*78.75

SUBJECT:	COR-THIB I	orate name - must include suf	fix)	
	(		,	
Enclosed is an origin	nal and one(1) copy of the article	les of incorporation and a	check for:	_
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
	ADDITIONAL COPY REQUIRED			
FROM: Paul M. Concelli Sec 99 Name (Printed or typed)				
	111 3 <sup>f3</sup> ST.	Address	AHASSEE,	FILED:
	BATON ROUSE City,	(A) 70801 State & Zip	STATE FLORIDA	3:46
	225 <u>387.</u> Daytime T	6269		<u> </u>
Paul M. Colcol	CNE TO	elepnone number		· · · · · · · · · · · · · · · · · · ·
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NOTE: Please provide the original and one copy of the articles.

## 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.	FILED	
ARTICLE I NAME  The name of the corporation shall be: $COR-THIS I_{wc}.$	99 OCT 19 PM 3: 46 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:		
501-B SOUTHARD ST. Key West. Fl. 33046-	・	
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at  (COSHACES	any one time is:	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRE	<u>sss</u>	
501-B Southard SI. Key West. Fl. 33040		
ARTICLE V INCORPORATOR  The name and address of the incorporator to these Articles of Incorporation are:		
PaulM. Concelli/michael E. Thibodeaux 501-B Southard ST.		
10/18/ Signature/Incorporator  Southard St.  10/18/  Date of the state	9 9 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 obligations of my position as registered agent

Signature/Registered Agent