TRANSMITTAL LETTER
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SECRETARY OF STATE
TALLAHASSEE, FLORID

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

SUBJECT:	(Proposed corpor	INC . SPEC	<u>CIALIGT</u>	<u>—</u> 	
Enclosed is an origin \$70.00 Filing Fee	**s78.75 ** \$78.75 ** Filing Fee & Certificate of Status	s of incorporation and a c \$78.75 Filing Fee & Certified Copy ADDITIONAL COI	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM:	THERESA Name (Pr	ANUE CA	RLUCCI		
	1300 - 2B	S FRENCE	4 AUE		
	SAN FORD City, S	FL 327' State & Zip 30) 00 <u>030</u> 241	13-4	
<u>407 - 33ο - 1931</u> -10/25/9901110006 ******78.75 ******78.75 Daytime Telephone number					

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.

ARTICLE	I	NAME
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The name of the corporation shall be:

ACT INC. SPECIALIST

ARTICLE II PRINCIPAL OFFICE

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

1300 - 28 SO FRENCH AUE

SAN FORD, FL 32771

<u>ARTICLE III SHARES</u>

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

5,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

THERESA ANNE CARLUCCI. 1300-2B SO, FRENCH AVE.

SANFORD, FL 32711

ARTICLE V INCORPORATOR

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

THERESA ANNE CARLUCCI

PO BOX 1091

OSTEEN, FL

32764

Signature/Incorporator

4 oct 99

Date

(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

1 Oct 99

Date