

TRANSMITTAL LETTER

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

P99000096201

200003028722--9
-10/29/99--01031--007
*****78.75 *****78.75

SUBJECT: C & H Air, 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
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Lazaro Campos
Name (Printed or typed)

5317 Rowe Trail
Address

Pace FL 32571
City, State & Zip

(850) 572-1709
Daytime Telephone number

FILED
99 OCT 29 AM 11:25
TALLAHASSEE, FLORIDA

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

CJH
11/2/99

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:

C & H Air, Inc.

ARTICLE II PRINCIPAL OFFICE

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

*5317 Rowe Trail
Pace, Fl. 32571*

ARTICLE III SHARES

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

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

*Lazaro Campos
5317 Rowe Trail
Pace Fl 32571*

ARTICLE V INCORPORATOR

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

*Karen L. Slocum
5640 Keystone Rd
Pensacola, Fl. 32504*

Karen L. Slocum
Signature/Incorporator

10/21/99
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

Lazaro Campos
Signature/Registered Agent

10/21/99
Date

FILED
99 OCT 29 AM 11:25
STATE OF FLORIDA
TALLAHASSEE, FLORIDA