TRANSMITTAL LETTER

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

300002994773---3 -09/23/99--01041--017 *****87.50 *****87.50

Management Inc

Enclosed is an original and one(1) copy of the articles	of incorporation and a check for
---	----------------------------------

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

Filing Fee

& Certified Copy

Filing Fee,

\$87.50

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Anthony

) 573 - 9653 Daytime Telephone number

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

A Howell NOV 1 5 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 2, 1999

ANTHONY F. CAPPOLA 6848 COPPERFIELD DRIVE NEWPORT RICHEY, FL 34655

2ND MAILING

SUBJECT: C.A.P.P. MANAGEMENT CORP.

Ref. Number: W99000025265

We have received your document for C.A.P.P. MANAGEMENT CORP. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6925.

Angela Howell Document Specialist

Letter Number: 399A00052571

ARTICLES OF INCORPORATION

FILED

1999 SEP 23 PM 2: 08

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

The name of the corporation shall be: A.C.L. MANAge MENT. Corp. ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 6848 COPPERFICIE DR New Port Richer, 71 34655 ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 INITIAL REGISTERED AGENT AND ST The name and Florida street address of the initial registered agent are: 6848 COPPERFIELE DR New Port Richer, 771 INCÓRPORATOR ARTICLE V The name and address of the incorporator to these Articles of Incorporation are: 6848 COPPER FIELD DA ANTHONY CAPPOLA Ner Poit Richer, 71 34655 Signature/Incorporator (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

Date