

TRANSMITTAL LETTER

P 99000106268

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

700003062037--4
-12/06/99-01118--015
*****78.75 *****78.75

SUBJECT: EXPLORES INCORPORATED
(Proposed corporate name - must include suffix)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 DEC -6 PM 1:20

FILED

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: JOHN TAYLOR EDWARDS
Name (Printed or typed)

15 PARADISE PLAZA, #336
Address

SARASOTA, FL 34239
City, State & Zip

(941) 351-8789
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

The name of the corporation shall be:

EXPLORES INCORPORATED

ARTICLE II PRINCIPAL OFFICE

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

6473 PARKLAND DRIVE
SUITE 103
SARASOTA, FL 34243

ARTICLE III SHARES

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

750 SHARES OF STOCK

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JOHN TAYLOR EDWARDS
1210 MYRTLE ST.
SARASOTA, FL 34234-5931

ARTICLE V INCORPORATOR

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

JOHN TAYLOR EDWARDS
1210 MYRTLE ST.
SARASOTA, FL 34234-5931

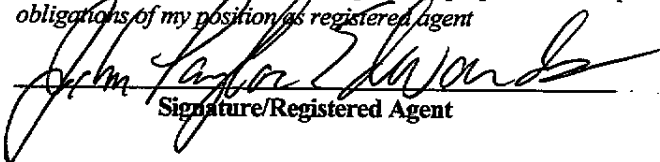

Signature/Incorporator

12-01-1999

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

12-01-1999

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 DEC -6 PM 1:20

FILED