P99000107984

TRANSMITTAL LETTER

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

SUBJECT: <u>Acquisitions Unlimited, Inc.</u>
(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

☐ **$122.50**
Filing Fee
& Certified Copy

☐ **$131.25**
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: <u>Jan Fowler</u>
Name (Printed or typed)

<u>18330 Crawley</u>
Address

<u>Odessa, Florida   33556</u>
City, State & Zip

<u>(813)-920-7880</u>
Daytime Telephone number

99 DEC 13 AM 4:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

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:

> Acquisitions Unlimited, Inc.

ARTICLE II   PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:

> 18330 Crawley
> Odessa, Fl 33556

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

> 1,000 shares

ARTICLE IV   INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:

> Jan Fowler
> 18330 Crawley
> Odessa, Fl 33556

ARTICLE V   INCORPORATOR
The **name and address** of the incorporator to these Articles of Incorporation are:

> Jan Fowler
> 18330 Crawley
> Odessa, Fl 33556
> 406-78-2458

Signature/Incorporator	12/9/99 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	12/9/99 Date