1099000108011 TRANSMITTAL LETTER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Tallahassee, FL 32314			
SUBJECT:	age Inc. porate name - must include suf	fix)	
Enclosed is an original and one(1) copy of the arti		00003067' -12/13/390 *****78.75 check for:	9495 1098003 *****78.75
S70.00 \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy.	□ \$131.25 Filing Fee, Certified Copy & Certificate	
FROM: Tim Can	ADDITIONAL CO	PY REQUIRED	- p
63 Con	cord Dr. Address		•
Ormond	Beach, FC	32176	-

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

Daytime Telephone number

- ---- DEC 1 5 1999

ARTICLES OF INCORPORATION	
The undersigned incorporator, for the purpose of forming a corporation under Business Corporation Act, hereby adopts the following 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.	"LLA	HZ

ARTICLE I	NAME
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The name of the corporation shall be:

Tim Candage Inc.

ARTICLE .	Π P	RINCIPAL	OFFICE

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

63 Coi	cord 1	Dr.	
Ormand	Bch.	FC.	#32176

ARTICLE III

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

1000 shares

ARTICLE IV	INITIAL REGISTERED	AGENT AND	STREET	ADDRESS

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

Tim Candage 63 Concord D	<u>–</u>
63 Concord N) _r
Ormand Bah,	FL.#32176

INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Tim Condage Inc.
63 Concord Dr. Ormand Beh., FG. 32176
Signature/Incorporator

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(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