



P9900011636

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99 DEC 13 PM 4:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032  
REFERENCE : 514107 7199757  
AUTHORIZATION : *Patricia Pizito*  
COST LIMIT : \$ 87.50

ORDER DATE : December 13, 1999

ORDER TIME : 3:54 PM

ORDER NO. : 514107-005

000003068570--5

CUSTOMER NO: 7199757

CUSTOMER: Mr. Bertrand Lehelley  
HEXAGON INTERNATIONAL, INC.  
HEXAGON INTERNATIONAL, INC.  
P.o. Box 736

Loughman, FL 33858

DOMESTIC FILING

NAME: ~~FRENCH CORNER OF FLORIDA, INC.~~  
*CORNER OF FRANCE, INC.*

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY (PLEASE NOTE: WE NEED 2 CERTIFIED COPIES)
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christine Lillich

*2544*  
~~*W99-28467*~~

EXAMINER'S INITIALS: *PH 12/29/99*

RECEIVED  
99 DEC 13 PM 4:10  
OFFICE OF THE  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

December 14, 1999

CSC NETWORKS  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

SUBJECT: FRENCH CORNER OF FLORIDA, INC.  
Ref. Number: W99000028467

**RESUBMIT**  
Please give original  
submission date as file date.

We have received your document for FRENCH CORNER OF FLORIDA, INC. and the authorization to debit your account in the amount of \$87.50. However, the document has not been filed and is being returned for the following:

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.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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) 487-6973.

Claretha Golden  
Document Specialist

Letter Number: 599A0005863

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

99 DEC 29 PM 12:16

RECEIVED

ARTICLES OF INCORPORATION  
OF

CORNER OF FRANCE, INC.

FILED

99 DEC 13 PM 4: 10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE 1

**Name**

The Name of the corporation shall be CORNER OF FRANCE, INC.

ARTICLE 2

**Principal Office**

The principal office of the corporation is located at 543 Pine Lake View Dr, Davenport, FL 33837, and its mailing address is the same.

ARTICLE 3

**Corporate Purposes, Powers and Rights.**

The purpose of the corporation is to engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE 4

**Duration of the Corporation.**

Existence of the corporation shall commence on the date all fees are paid and these Articles of Incorporation are filed by the Secretary of State and the corporation shall exist perpetually unless dissolved according to law.

ARTICLE 5

**Authorized Stock**

The total number of shares of capital stock which the corporation has the authority to issue is 10,000 shares of common stock, with a \$1.00 per value per share.

ARTICLE 6

**Registered Office and Registered Agent.**

The street address of the initial registered office of the corporation in the state of Florida shall be: 543 Pine Lake View Dr, Davenport, FL 33837. The name of the initial registered agent of the corporation at the registered office shall be Bertrand LE-HELLEY.

## ARTICLE 7

### **Initial Board of Directors.**

The initial Board of Directors shall consist of one (1) directors. The name and address of the person who shall serve as director of the corporation until the first meeting of shareholders is:

Name:

Address:

Louise Etonde-Elong

Villa Schneider  
76 Av Marechal Juin  
06400 Cannes, France

## ARTICLE 8

### **Incorporators**

The name and address of the incorporators of the corporation are:

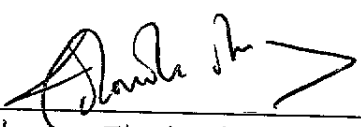
Name:

Address:

Louise Etonde-Elong

Villa Schneider  
76 Av Marechal Juin  
06400 Cannes, France

**Executed this 16th day of November 1999.**

  
X Louise Etonde Elong.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/ REGISTERED OFFICE**

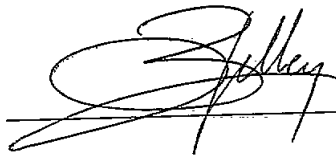
PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The Name of the Corporation is: CORNER OF FRANCE, INC.

2. The Name and Address of the Registered Agent and Office is:

BERTRAND LE-HELLEY  
543 Pine Lake View Dr  
Davenport, FL 33837

*HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS THE ABOVE STARTED 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.*



BERTRAND LE-HELLEY

DIVISION OF CORPORATIONS, PO BOX 6327, TALLAHASSEE, FL

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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