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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 NOV 20 PM 12:55

TRANSMITTAL LETTER

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

800002352568--8  
-11/20/97--01013--020  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: all-mer inc.  
(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

FROM: Mike Davis  
Name (printed or typed)

P.O. BOX 565  
Address

Flagler Beach, Fl 32136  
City, State & Zip

904-461-8321  
Daytime Telephone number

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

B. BROWN NOV 24 1997

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# ARTICLES OF INCORPORATION

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*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

## ARTICLE I NAME

The name of the corporation shall be:

all-mer inc.

## ARTICLE II PRINCIPAL OFFICE

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

P.O. BOX 565  
FLAGLER BCH., FL. 32136

## ARTICLE III SHARES

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

1000 SHARES COMMON  
NO PAR VALUE

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MIKE DAVIS  
487B MIDWAY DR  
OCALA, FL 34474

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MIKE DAVIS  
487 B MIDWAY DR.  
OCALA, FL 34474

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

14 day of NOVEMBER, 1997.

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Articles of Incorporation  
Filing Fee - \$35

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

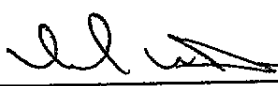
PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: all-mer inc.

2. The name and address of the registered agent and office is:

MIKE DAVIS  
(Name)  
487 B MIDWAY DR.  
(P.O. Box not acceptable)  
OCALA, FL. 34474  
(City/State/Zip)

*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)

11/14/97  
(Date)