

TRANSMITTAL LETTER

P99000024965

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

500002803785--6
-03/12/99-01037-009
*****78.75 *****78.75

SUBJECT: Big IKE, 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 of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: CARL J. BURGESS
Name (Printed or typed)

1005 Polk St.
Address

BARTOW, FL
City, State & Zip

941-519-0555
Daytime Telephone number

FILED
99 MAR 12 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

F. CHESSER MAR 16 1999

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

**ARTICLES OF INCORPORATION
BIG IKE, INC.**

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 Big Ike, Inc.

Article II Principal Office

The Principal place of business and mailing address of this corporation shall be, 320 S Pine Ave., Ft. Meade, Florida 33841

Article III Shares

The number of shares of stock that this corporation is initially authorized to have outstanding at any one time is limited to one hundred.

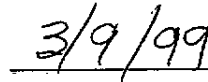
Article IV Registered Agent

The name and Florida address of the initial registered agent are Carl J. Burgess, 1005 Polk Street, Bartow, Florida 33830.

Article V Incorporator

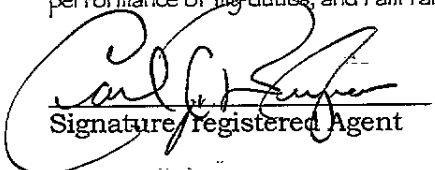
The name and address of the incorporator of these Articles of Incorporation are, Edward E. Isaac, 320 S Pine Ave., Ft Meade, Florida 33841

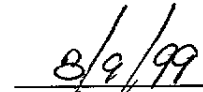

Signature/Incorporator


Date

Registered Agent

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


Date

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TALLAHASSEE, FLORIDA
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