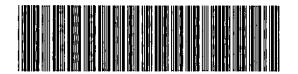
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COVER LETTER

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

SUBJECT:	PROPOSED CORPORATE	S WOY ENAME-MUST INCLUI	ld fou DE SUFFIX)	N			
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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate				
FROM: _	Jon Stha Name (Prin		+ Parver	_			
14250 SW 107C+ Mi, zwi, FL 33176							
_	7 86	ate & Zip 3 9 2 7 2 cephone number	<u>)</u>				

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

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION In compliance with Chapter 617, F.S., (Not for Profit) ARTICLE I The name of the corporation shall be: PRINCIPAL OFFICE ARTICLE II Mailing address, if different is: Principal street address: ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: **MANNER OF ELECTION** The manner in which the directors are elected and appointed: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Address Address

Address

Name and Title: 10	nethen average of ficer (5/1) effersin Address:	
Name and Title: Address	Name and Title: Address:	
	ISTERED AGENT reet address (P.O. Box NOT acceptable) of the registered agent is: 1902then Robert Terver [42505w(07ct) miemi; FL 33176	14 DEC -4 PH 2: 0 1ALLARY OF STATE
ARTICLE VII INCO	ORPORATOR The Incorporator is: 101250 SW107Ct mizmi FL33176	emirm ←1
certificate, I am familiar s	egistered agent to accept service of process for the above stated corporate with and accept the appointment as registered agent and agree to act in this Required Signature of Registered Agent and affirm that the facts stated herein are true. I am aware that any false in a constitute of a third degree felony as provided for in s.817.155, F.S.	s capacity Date

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