N97000006555

TRANSMITTAL LETTER

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

900002349859--6 -11/18/97<u>-</u>-01005--<u>0</u>09_

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00

\$78.75

\$122.50

\$131.25

Filing Fee

Filing Fee & Certificate

Filing Fee & Certified Copy Filing Fee, Certified Copy

& Certificate

NNIE FAYE NichoLI Name (Printed or typed)

6815 CAroLine St.

850 636-7333 Davtime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I Name	97 N
The name of the corporation shall be:	
Lois PARMER ASSOCIATION INC.	HASSEE FI
ARTICLE II	8: 40 8: ATE LORIDA

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

6815 CAROLINE ST. Milton, 71.32,570

> ARTICLE III Purpose(s)

The specific purpose(s) for which the corporation is organized is(are):

TO AWARD A DESIREING 9th Grader
A Shorlarship . They must maintane
A 3.3 grade point ADDAGE AND ENTER
INTO College.

ARTICLE IV

Manner of election of directors

The manner in which the directors are elected or appointed is as follows:

The members vote every two years.

ARTICLE V

Limitation of corporate powers

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes, unless limited are as follows:

Nothing

ARTICLE VI

Initial registered agent and street address

The name and the street address of the initial registered agent is:

ANNIE FAJE PARMET - NICHOLS

1815 CATOLINE ST.

Millow, Fl. 32570

ARTICLE VII

Incorporators

The name(s) and the street address(es) of the incorporator(s) for these articles of incorporation is(are): ANNIE FAYE PARMER - Nichols

6815 CAROLINE St.

Milton, 71, 32570

The undersigned incorporator has executed these Articles of Incorporation this _____ 30

(An additional article must be added if an effective date is requested)

Signature of Incorporator:

Annie F. Parmer-Nichols

Typed name of incorporator signing

Notarization is not required

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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:			
	LOIS PARMER ASSOCIATION INC.			-
	(mast metade surrix)			
2.	The name and address of the registered agent and office is: ANNIE FAYE PARINER-Wichola (NAME) 6815 CACOLINE ST	TALLAHASSEE FLO		
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)	RIDA	5	
	Milton, 71.32570 (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.