TRANSMITTAL LETTER

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

SUBJECT:	SW Sub	os Inc				
(Proposed corporate name - must include suffix)						
		10	00003092 -01/07/00- 99157.50	-01054024		
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:						
\$70.00 Filing Fee	Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	of		
FROM:	Chasity (walker inted or typed)		_		
	Panama Cul	ddress State & Zip	2404 F	APPROVI		
	850 760 Daytime Tel	1- 3185	SIATE ORIDA	2: 44 2: 44		

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

ARTICLES OF INCORPORATION

The name of the corporation shall be:

Signature/Incorporator

ARTICLE I

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

SWSabs Inc	•
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall b	e:
9450 Thomas Or. Panama City Beach of	12408
P.O. Ray 175 June House Fl 2011	1:11
P.O. Box 175 Lynn Haven, Fl 324 ARTICLE III SHARES The number of character of the Hall	MM
The number of shares of stock that this corporation is authorized to have outsta	anding at any one time is:
,	and the any one time is.
100	-
ARTICLE IV INITIAL REGISTERED AGENT AND STREET	T ADDRESS
The name and Florida street address of the initial registered agent are:	
Alving I Walker	: _
353 Bell Circle Cynn Haven Fl 32444	7.00
ARTICLE V INCORPORATOR	AEO JA A
The name and address of the incorporator to these Articles of Incorporation a	re: 译用 Z F P
Chasity M. Walker & Steve M. Wick	
3111 Debra Blud	* \(\text{3} \) \(\text{2} \)
Panama City, Fl. 32405	2: 1.4 FLORIDE
C1 . 100 () 1	_

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

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

Olveria d. Walker	1-7-00
Signature/Registered Agent	Date