TRANSMITTAL LETTER

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

SUBJECT: U.S	S.RETAIL SERVICE	es, inc.		
	Proposed corporate r	iame - must include si	iffix)	-
Enclosed is an origina	al and one (1) co	py of the articles c	-02/15 ****	8135684——9 5/0001075006 490.00 *****79.75 and a check
for : [] \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	X \$122.50 Filing Fee & Certified Copy Additional Cop	#131.25 Filing Fee, Certified Copy & Certificate y Required	
8635 Leighto		printed or typed)	TALLAHASSE	APPRI FIL
		on Dr. Address	To the second se	
	Tampa, Florida 33614		OFIIDA	
	City, State & Zip 1 813 453-1956		alle di distributura per di septembra di sep	
	Daytime Telephone number		و به در	•

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

U.S. RETAIL SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

16910 Equestrian Dr. Odessa, Florida 33556

ARTICLE III SHARES

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

50 shares of common stock @ \$10.00 per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Robert Lyons 8635 Leighton Dr. Tampa, Fla. 33614

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Lana Barrows 16910 Equestrain Dr. Odessa, Florida 33556

Signature/Incorporator

1-1-2000

Date

(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

Signature/Registered Agent