# DOODDOR1220 TRANSMITTAL LETTER

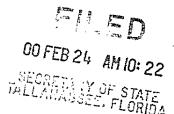


Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	AIMON SCOT	// // // // ¿ ate name - must include so	nffix)
. <del></del>		- ,	300003146 -02/24/000 *****78.75
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	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
	ADDITIONAL COPY REQUIRED		
FROM: ALMON J SCOTT  Name (Printed or typed)			
1006 SOUTHARD ST. Address			
MFY WF5T FL. 33040 City, State & Zip			
305 295 8412  Daytime Telephone number			

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 Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

## <u>ARTICLE I NAME</u>

The name of the corporation shall be:

ALMON SCOTT INC.

### ARTICLE II PRINCIPAL OFFICE

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

1227 DOUAL ST. KEY WEST FL. 33040

### <u>ARTICLE III SHARES</u>

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

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ALMON SCOTT 1006 SOUTHARD ST KEY WEST FL 33040

# ARTICLE'V INCORPORATOR

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

ALMON SCOTT

1006 SOOTHARD ST.

MEY'WEST FL 33040

Signature Incorporator

2/2 1/00 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

2/21/00

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