POSSED 24230 TRANSMITTAL LETTER

TRANSMITTAL LETTER	
FROM: Name of corporation: Southern TRIREME Street address of the corporation 3741 Apt. B A1A South ST. Augustine, FL. DEAR CORPORATIONS DIVISION: Please find enclosed:	
 1. An original Articles of Incorporation and one copy for the above named corporation. 2. A certified check or money order in the amount of \$ 10,00 for filing fees. 	
A certified copy is is not requested. If a certified copy is requested, the additional fee in the amount of \$ 8.75 is enclosed. 20003141432	7
Please send responses or receipts concerning this filing to the above address. Thank you very much.	

Copyright © 1994 Consumer Corporation

Date:

Name of Incorporator

Signature of Incorporator:



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 25, 2000

WANDA DAVIS 3741 APT. B A1A SOUTH ST. AUGUSTINE, FL 32084

SUBJECT: SOUTHERN TRIREME Ref. Number: W00000005202

We have received your document for SOUTHERN TRIREME and your check(s) totaling \$78.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6929.

Shannon Thompson Document Specialist

Letter Number: 300A00010236

ARTICLES OF INCORPORATION FLORIDA BUSINESS CORPORATION ACT

Pursuant to Chapter 607 of the Florida Business Corporation Act, the undersigned inco adopts these articles of incorporation for the purpose of forming a for-profit corporation.

Article 1. The name of the Corporation is:

Southern Trireme Inc.

Article 2. The principal place of business and mailing address of this corporation is:

3741 Apt B A1A South St. Augustine, FL 32084

Article 3. The corporation is authorized to issue one class of stock, that being 1,000 shares of no par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation.

Article 4. No Director shall be held liable to the corporation or its shareholders for monetary damages due to a breach of fiduciary duty, unless the breach is a result of self-dealing, intentional misconduct, or illegal actions.

Article 5. The effective date of this filing is	[XX] The actual date and time of filing.
	[]/ _/ at 12 o'clock PM.

Article 6. The name and address of the corporation's initial registered agent is: Wanda Davis

3741 Apt B A1A South

St. Augustine FT 32084 Having been named as registered agent and to accept service of process for the above named corporation at the place designated in this document, 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 tamiliar with and accept the obligations of my position as registered agent.

Signature of Registered Agent Date: 00

Article 7. The name and street address of the incorporator of this corporation is:

Wanda Davis	3741 Apt B A1A South	
In witness whereof, the undersi	St. Augustine, FL 32084 gned incorporator has executed these Articles of	of Incorporation on the data
below.	And Que	or morporation on the date
Signature of Incorporator	varac vamo	Date: /5/00

CERTIFICATE OF DESIGNATION OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to section 607.0501 of The Florida Business Corporation Act, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office and registered agent, in the State of Florida.

1. The name and address of the corporation's registered agent and registered office is:

Name

Street address

WANDA DAVIS

3741 Apt. B ALA South

ST. AUGUSTINE, FL.

32084

Having been named as the 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 of registered agent;

Date of signature: