P00000032684

Department of State Division of Corporati P. O. Box 6327 Tallahassee, FL 3231 SUBJECT:	14 FC VENTURE		TALLAHASSEE, FLORIDA	FILED 00 MAR 31 AM 9: 37
	(Proposed corpor	rate name - must include suf	ffix)	_
Enclosed is an origina	al and one(1) copy of the article	_	000031912 -03/31/0001 ****128.75 check for:	23 74 1015004 *****78.75
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	P.O. BOX S	ADDITIONAL CO	OO MAK 3	RECEIVED
	(850) 841-4	1382		

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

Daytime Telephone number

Will Wait

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ARTICLES OF INCORPORATION

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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.

The name of the corporation shall be: H.C.NENTORES In C	APPI FILAHASS
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shows 5572 IAUAHASSEE, FL 32:	nall be: STATE 337 3.14-5572
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have	outstanding at any one time is:
5,000	outsiding at any one majo is.
ARTICLE IV INITIAL REGISTERED AGENT AND STE The name and Florida street address of the initial registered agent are:	REET ADDRESS
L STEPHEN COX	デー・ - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorpora	tion are:
Signature/Incorporator	02 23 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

Date