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TRANSMITTAL LETTER

Department of Stat Division of Corpora P.O. Box 6327		
Tallahassee, FL 32	2314 800032 -05/08/	42148-0111
SUBJECT:	FOUR PINES INC. *****122	2,50 *****78.75
	(proposed corporate name)	
		•
Enclosed is an original for \$\frac{122.50}{.}	ginal and one (1) copy of the articles of incorporation and	l our check
FROM:	ROBERT J RAPPORT	= 0
	Name (printed or typed) 1962 OSCEOLA PARKWAY	OO MAY
	Address KISSIMMEE FLORIDA 34743	FILE -8 ASSE
	City, State, & Zip	AM 8: 1
	Telephone Number	RID RID

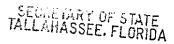
Note: Please provide the original and one copy of the Articles.

FILED

00 MAY -8 AM 8: 19

ARTICLES OF INCORPORATION

<u>OF</u>



FOUR PINES INC

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

ARTICLE ! NAME

The name of the corporation shall be: FOUR PINES INC

A Corporation licensed to engage in any and all lawful activities and to have perpetual duration.

ARTICLE II PRINCIPAL OFFICE

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

1962 Osceola Parkway, Kissimmee Fl 34743

ARTICLE III SHARES

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

One Hundred (100)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Robert J Rapport 1962 Osceola Pkwy Kissimmee Fl 34743

ARTICLE VI	<u>INCORPORATOR(S)</u>
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The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Robert J Rapport 1962 Osceola Pkwy Kissimmee Fl 3474

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

Signature

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1.	The name of the corporation is: FOUR PINES INC.	•	3 - N. J. N.

2.	The name and address of the registered agent and office is:		
	ROBERT J RAPPORT (NAME)	OO MAY SECRET	
	1962 OSCEOLA PARKWAY	-8 AM	FLED
	(P.O. BOX <u>NOT</u> ACCEPTABLE)	1 8: 19 FLORIDA	
	KISSIMMEE FLORIDA '34743		·
	(CITY/STATE/ZIP)		

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.

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SIGNATURE	MANI		en e
DATE	May 5, 2000		