(SAMPLE LEFTER OF FLANSMITTAL) AVE April 27, 2000

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

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Re:	TSOY	i, Inc.	, Inc.		
	(Na	me of Corporation)		_	

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

David M. Garrick

David M. Garrick

(Individual's Name)

YOST,	Inc.	
	(Name of Corporation)	

MAILING ADDRESS OF CORPORATION	N -*
P.O. Box 1719	٠
	7
Crystal River, FL 34423	
PHONE —	
(352) 563-5004	
Area Code Number Ext.	

T BROWN MAY 1 0 2000

ARTICLES OF_INCORPORATION

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YOST, Inc.

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

	ARTICLE	I - CORPORATE NAME	ASC STATE
The name of	the corporation is:		The same of the sa
The hame of	•	, Inc.	
			\$ 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.
•	ARTIC	CLE II - DURATION	92
This cornors	tion shall exist perpetually unless disso		SP SP
This corpora	tion share exist perpetually unless disso		
	ARŤIO	ĈLEJII - PURPOSE	
The corpora United States and	tion is organized for the purpose of engi the State of Florida.	aging in any activities or busines	s permitted under the laws of the
	ARTICLE	IV - CAPITAL STOCK	
			1 00
The corporal	ion is authorized to issue 500 s	hares of common stock, par valu	e \$per share.
The street ad	dress of the initial principal office and,	NITIAL PRINCIPAL OFFICE if different, the mailing address	
A	NAME OF THE OWNER OWNER OF THE OWNER OWNE		
CITY	Crystal River	FLORIDA	ZIP 34423
Mailing ade	lress, if different		
STREET ADDRE	SS		
CITY		FLORIDA	ZIP
	ARTICLE VI - INITIAL I	REGISTERED OFFICE AND A	AGENT
The street a	ddress of the initial registered office		
	id M. Garrick		

420 NW 6th Street

34428

ZIP -34423

Crystal River, FL

ILORIDA

ADDRESSp.O. Box_1719

Crystal River

CITY

ARTICLE VII - INITIAL BOARD OF DIRECTORS

NAME David M. Garrick			
ADDRESS P.O. Box 1719		-	
CTTY Crystal River	STATE	FL	ZIP34423
NAME Joseph D. Garrick			
ADDRESS P.O. Box_1773			
(TTY Crystal River	STATE	FL	ZIP34423
NAME		5.y	
ADDRESS			
CILA	STATE		ZIP
NAME Book & W. Grand of			
NAAR - 17			
David H. Gallick			
ADDRESS P.O. Box 1719	STATE	FT.	ZII'34423
ADDRESS P.O. Box 1719 CITY Crystal-River	STATE	FL .	ZII'34423
ADDRESS P.O. Box 1719 CITY Crystal-River NAME	STATE	FL	ZIP34423
ADDRESS P.O. Box 1719 CITY Crystal-River NAME ADDRESS	STATE	FL	ZIP34423 ZIP
ADDRESS P.O. Box 1719 CTTY Crystal-River NAME ADDRESS CTTY	7	FL	
ADDRESS P.O. Box 1719 CTTY Crystal-River NAME ADDRESS CTTY NAME	7	FL	
ADDRESS P.O. Box 1719	7	FL	
ADDRESS P.O. Box 1719 CITY Crystal~River NAME ADDRESS CITY NAME ADDRESS CITY OUTPY ADDRESS CITY	STATE		ZIP
ADDRESS P.O. Box 1719 CITY Crystal~River NAME ADDRESS CITY NAME ADDRESS CITY he undersigned incorporator(s) have executed the	STATE		ZIP
ADDRESS P.O. Box 1719 CTTY Crystal-River NAME ADDRESS CTTY NAME ADDRESS CTTY ne undersigned incorporator(s) have executed the	STATE STATE		ZIP ZIP 27th
ADDRESS P.O. Box 1719 CTTY Crystal-River NAME ADDRESS CTTY NAME ADDRESS CTTY the undersigned incorporator(s) have executed the lay of April	STATE STATE		ZIP

REGISTERED AGENT/ REGISTERED OFFICE

TALLAHASSEE, FLORIDA

YOST, Inc.

(name of corporation)

Pursuant to	Horida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above	orporation, organized under the laws of the State of Florida with its registered office
	in the Articles of Incorporation. 420 NW 6th Street
:	Crystal River, FL. 34428
has named	David M. Garrick

located at the aforesaid address, as its registered agent to accept service of process within this state. \Box

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)

April 27, 2000

(Date)