POODOODS 4968 Department of State

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

SUBJECT: SCUZZY MAN, INC. (Proposed corporate name - must include suffix)				
Enclosed is an origin	nal and one(1) copy of the articles		00003270 -05/30/000 *****78.75	577 1107008 *****78.75
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM: SIDNEY L. SCRUGGS, TV Name (Printed or typed) NO COPY 1562 FOXRIDGE RUN, SW Address				
	City, S (863) 947- Daytime Tel		TALLAHASSEE, FL	FILED 00 MAY 30 AM 8

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

RTICLES 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.

ARTICLE I

The name of the corporation shall be:

SCUZZY MAN, INC.

PRINCIPAL OFFICE

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

1562 FOXRIDGE RUN, SW WINTER HAVEN, FL 33880

ARTICLE III **SHARES**

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

1,000 SHARES AT \$1.00 PARVALUE

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

SIDNEY L. SCRUGGS, TV

1562 FOY RIDGE TON, 5W WINTER HAVEN, FL 33880 ARTICLE V INCORPORATOR

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

SIDNEY L. SCRUGGS, IV

1562 FOXRIDGE RUN, SW

WINTER HAVEN, FL 33880

(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 Pgistered agent

Signature/Registered Agent

5/23/00