

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

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

70003294027--5 -06/16/00--01057--021 \*\*\*\*\*87.50 \*\*\*\*\*\*87.50

(Proposed corporate name - must include suffix

\$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 PY REQUIRED		
FROM	ECRETAI TALLAHAS	2000 JUN			
	P.O. BOX 13	S/YY Address	<del></del>	RY OF STA	16 PM 1:
	TAMPA FL	33684 State & Zip		3	ည်

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

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OR 6/22

## ARTICLES OF INCORPORATION

Signature/Incorporator

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

ARTICLES OF INCORPORATION	$\geq 22$		
The standardian of incomment of the standardian of	HASE ASE ASE ASE ASE ASE ASE ASE ASE ASE	Ξ	
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 NAME		3	
The name of the corporation shall be:	35	F	
The I.t. S. foundation, Inc.		ယ <u>ှ</u>	

P.O. BOX 15144
TAMPH FL 33684
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at any one time is:  // OCC
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address of the initial registered agent are:  (HARLIC THOMAS  5548 HARBORSINE OR  TAMPA FL 33615
ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:  (HANLIE THOMAS
CHANLIE THOMAS  5548 HARPONSIDE DA  TAMPH FL 33615

(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

Charle show	6-12-00	
Signature/Registered Agent	 Date	-