TRANSMITTAL LET

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

300003348673--6 -08/08/00--01022--001 *****70.00 ******70.00

SUBJECT:	WALEN ENTERP	RISES, INC.		
	(Proposed corporate	name - must include s	uffix)	
	•			
Enclosed is an origin	nal and one (1) co	opy of the articles	of incorporation a	and a check
for :	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
XX \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	PILED ANG -8 M SECRETARY OF S
		Additional Cop	y Required	FILED AHASSEE,
		E. WALEN (printed or typed)		9: 16 FLORID
	191	9 LAKE ALDEN 1 Address	DR.	₽
		OPKA, FL 32712 y, State & Zip	, ,,,	-
	(40	7) 880-9913		
		Telephone number		fc 8/8
NOTE: Plass	e provide the e	riginal and one	sony of the a	\psi

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

ARTICLES OF INCORPORATION

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 I NAME

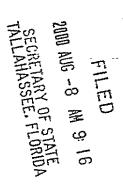
The name of the corporation shall be:

WALEN ENTERPRISES. INC.

ARTICLE II PRINCIPAL OFFICE

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

1919 LAKE ALDEN DR. APOPKA, FL 32712



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) SHARES @ TEN DOLLARS (\$10.00) PER SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

AL E. WALEN 1919 LAKE ALDEN DR. APOPKA FL 32712

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

AL E. WALEN 1919 LAKE ALDEN DR. APOPKA, FL 32712

The unde	rsigned incorp	oorator(s) has(have	executed these Articles of Incorporation this
. 17		angust	
			Aluklan Signature
	. ————		Signature
	<u> </u>		Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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	on is: WALEN ENTERPRISES, INC.	·
	· ,	
2. The name and address of	the registered agent and office is:	
	AL E. WALEN	20
	(NAME)	
·	1919 LAKE ALDEN DR.	E -
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	
	APOPKA, FL 32712	F 51
	(CITY/STATE/ZIP)	語言
		>
	ristered agent and to accept service of process for the above	
	ignated in this certificate, I hereby accept the appointment as regi is capacity. I further agree to comply with the provisions of all st	
relating to the proper and co	mplete performance of my duties, and I am familiar with and acce	
obligations of my position as	registered agent.	
	Willem Com 5 Dond	
(S	IGNATURE) (DATE)	