# TRANSMITTAL LETTER



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

1 0 0 0 0 3 3 7 2 1 5 1 -- 3 - 08/24/00 -- 01084 -- 014 \*\*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

SUBJECT:	<u>S. Anderson</u>	, Inc.		
		name - must include su	ıffix)	
Enclosed is an <b>origi</b> r	nal and one (1) co	py of the articles o	of incorporation a	and a check
for :  \$70.00  Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy  Additional Cop	\$131.25 Filing Fee, Certified Copy & Certificate y Required	
FROM		S. Anderson (printed or typed)		
	19292 (	<u>Nest Indies L</u> Address	ane	
	Teques	ta, FL 33460 v. State & Zip	1	
	561-575 Davtime	5-1004 Telephone number		

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:

W.S. Anderson, Inc.

ARTICLE II PRINCIPAL OFFICE

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

19292 West Indies Lane Tequesta, FL 33469

ARTICLE III SHARES

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

100 (One Hundred)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

William S. Anderson 19292 West Indies Lane Tequesta, Fl 33469

#### 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):

Suzanne T. Anderson, 51% shareholder William S. Anderson, 49% shareholder 19292 West Indies Lane Tequesta, FL 33469

An additional article must be added if an effective date is requested.)

Signature

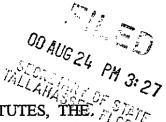
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

Notarization is not required

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 is: W.S. Anderson, Inc.
2.	The name and address of the registered agent and office is:
	William S. Anderson
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)
	Tegnesta, FL 33469 (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.

Willie Signature) 8/21/00 (Date)