43 TRANSMITTAL LETTER 00 SEP 27 PM 1:53 STATE LORIDA Department of State **Division of Corporations** 9000 24764 P. O. Box 6327 ****78.75 Tallahassee, FL 32314 SUBJECT: (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed is an original and one(1) copy of the articles of incorporation and a check for : **№** \$78.75 \$70.00 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: lame (Printed or typed) 524 488 Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

<u>ARTICLE I NAME</u> The name of the corporation shall be:

SNP Inc

ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:

Deerfield Beach, 7233441 ARTICLE III

The purpose for which the corporation is organized is:

Marketing - Promotions

ARTICLE IV SHARES The number of shares of stock is: 3500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Sancka Drot cycr. # 1524 Beach, 42 33441 <u>ARTICLE</u> VI ĔĠIŚŦĔŔĔŊ

The name and Florida street address of the registered agent is:

James Marquett

10407 Knoll way Tampa, 7633634

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sandra Propost / James Marquett Leerfield Beach, 10 #1254 *******

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Age

Signature/Incorporator

9-20-02

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Date