Prodood 95548

TRANSMITTAL LETTER

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



SUBJECT:	FREY HARE ENTERPRIZES IN	
	(Proposed corporate name - must include suffix)	

Enclosed is an origin	nal and one(1) copy of the articl	es of incorporation and a	check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED

FROM: _	Name (Printed or typed)
	122. LANGED LANG SIE
	WINFAL HOUBY, FL. 33884 City, State & Zip
	S63-324-1628 Daytime Telephone number

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



ARTICLES OF INCORPORATION

Signature/Incorporator

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

Business Corporation 120, 100 Co. 1
ARTICLE I NAME
The name of the corporation shall be:
ARTICLE I NAME The name of the corporation shall be: FREY HARE ENTER PRIZES, THE
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
122 LANTER LANE S.E. WINTER HAIRN, FL 33888
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
(100) OHE Hundred Sthress
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
ANGEL D. ANDREW: 122 LANTER LANE SE
WINTER HALEN, FL. 3385
APTICLE V INCORPORATOR
The name and address of the incorporator to these Articles of Incorporation are:
MICHER ANDREW, 122 LANGED LANE SE
Wister HALL, PL. 33884
9 19 00

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

Date

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

Signature/Registered Agent

9-19-00

Date