POOOOOIOH442

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

SUBJECT:	(PROPOSED CORPORA	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)		
Enclosed is an original \$70.00 Filing Fee	nal and one(1) copy of the artic \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	OPY REQUIRED]
EDO	Nicholas R. Fanella	a		
FROM	VI:Name (Printed or typed)		
	434 Tanglewood	434 Tanglewood Drive		
		Address	7 A	00 OCT 27
		Fort Walton Beach, FL 32547		
	Cit	City, State & Zip		
	850-862-7131	850-862-7131 <u>S</u>		3:44
	Daytime	Telephone number		101

WOODS ENTERPRISES INCORPORATED

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

04/0/27

ARTICLES OF INCORPORATION

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

The name of the corporation shall be Woods Enterprises Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 6482 Possum Ridge Road
Crestview, Florida 35239

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one-time is. One Thousand (2000) shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Donald R. Woods 6482 Possum Ridge Road Crestview, Florida 35239

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Donald R. Woods 6482 Possum Ridge Road Crestview, Florida 35239

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Signature/Incorporator

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

Date