

PO1000019031

DATE: February 5, 2001

Secretary of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, Fl. 32314

FILED

01 FEB 20 AM 10:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: SNM NELSON ENTERPRISES, INC.  
(name of corporation)

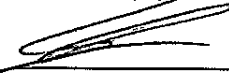
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\*\*\*\*\*78.75 \*\*\*\*\*78.75

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with a check in the amount of \$78.75.

This represents the cost of Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,



(individual's name)

SNM NELSON ENTERPRISES, INC.  
(name of corporation)

MAILING ADDRESS OF CORPORATION

560 TALL OAKS TERRACE		
LONGWOOD, FLORIDA 32750		
(407)323-2922		
AREA CODE	NUMBER	EXT

58221

**ARTICLES OF INCORPORATION**  
OF  
**SNM NELSON ENTERPRISES, INC.**  
(name of Corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

**ARTICLE I – CORPORATE NAME**

The name of the corporation is:  
**SNM NELSON ENTERPRISES, INC.**

**ARTICLE II – DURATION**

This corporation shall exist perpetually unless dissolved according to Florida law.

**ARTICLE III – PURPOSE**

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

**ARTICLE IV – CAPITAL STOCK**

The corporation is authorized to issue 100 share (100 ) of ONE  
Dollar(s) (\$1.00 ) par value Common Stock, which shall be designated "Common Share."

**ARTICLE V – INITIAL REGISTERED OFFICE AND AGENT**

The principal office, if known, or the mailing address of the corporation is:

Name: **SNM NELSON ENTERPRISES, INC.**

Address: **560 TALL OAKS TERRACE**

City: **LONGWOOD** Florida Zip: **32750**

The name and street address of the Initial Registered Agent of this Corporation is:

Name : **Thomas Messer, EA, PA.**

Address: **1323 Lyons Road**

City: **Coconut Creek** Florida Zip **33063**

**ARTICLES VI – INITIAL BOARD OF DIRECTORS**

This corporation shall have ONE ( 1 ) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

Name: **STEVE NELSON**

Address **560 TALL OAKS TERRACE**

City **LONGWOOD** Florida Zip **32750**

Name:

Address

City Florida Zip

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ARTICLE VII – INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME: STEVE NELSON

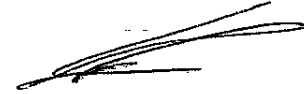
ADDRESS: 560 TALL OAKS TERRACE

CITY: LONGWOOD

STATE: FLORIDA

ZIP: 32750

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this  
14 day of FEB, 2001.

  
\_\_\_\_\_  
(Seal)

\_\_\_\_\_  
(Seal)

STATE OF FLORIDA  
COUNTY OF BROWARD

before me, a Notary Public authorized to take acknowledgements in the State and County set forth above,  
personally appeared

STEVEN NELSON

known to me and known to be the person(s) who executed the foregoing articles of Incorporation, and who  
acknowledged before me that HE executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this  
14 day of FEB, 2001.



Notary Public, State of Florida at Large)



Shari Messer  
MY COMMISSION # CC826634 EXPIRES  
May 19, 2003  
BONDED THRU TROY FAIN INSURANCE, INC.

**CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT**

CERTIFICATE OF REGISTERED AGENT

OF

**SNM NELSON ENTERPRISES, INC.**

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(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:  
The above corporation, desiring to organize under the laws of the state of Florida with  
Is registered office as indicated in the Articles of Incorporation

at 1323 LYONS ROAD  
COCONUT CREEK, FLORIDA 33063

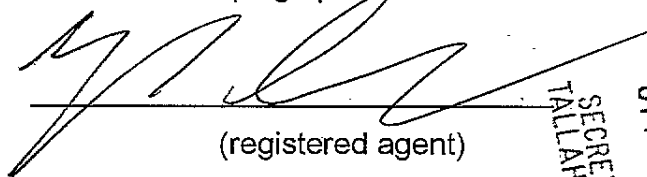
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Has named: THOMAS MESSER

Located at the aforesaid address, as its Registered Agent to accept service of process within  
this state.

**ACKNOWLEDGEMENT**

Having been named as Registered Agent to accept service of process for the above  
Stated corporation at the place designated in this certificate, and being familiar with  
The obligations of that position, I hereby accept to act in this capacity, and agree to  
Comply with the provisions of Florida Law in keeping open said office.

  
(registered agent)

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