PO 1000023436

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SUBJECT: J Thurston Martin, Inc.

I enclose an	orig	inal an	ıd 1	сору	of t	he	Articles	$\circ f$	Incorporation	for	the	above
corporation	and a	check	in 1	the ar	nount	of	<u> 79</u>					

SIGNED: MSLEBA (MILLER)
From:
PRISCILLA A. MARTIN
Name
21483 SHELDON AUR.

PORT CHARLOTTE FL 33952

941- 624-0223

Telephone Number

2201

ARTICLES OF INCORPORATION OF J Thurston Martin, Inc.



ARTICLE I NAME

The name of the corporation shall be: J Thurston Martin, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 21483 Sheldon Ave, Port Charlotte, FL 33952

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is: Priscilla A Martin 21483 Sheldon Ave Port Charlotte, FL 33952

ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: Priscilla A Martin 21483 Sheldon Ave Port Charlotte, FL 33952

The undersigned has executed these Articles of Incorporation this 27 14 day of FEB 2001.

.Incorporator

CERTIFICATE OF DESIGNATION

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: J Thurston Martin, Inc.
- 2. The name and address of the registered agent and office is:

 Priscilla A Martin

 21483 Sheldon Ave

 Port Charlotte, FL 33952

Signature: Muscella C. Martin

Title:

Date: 02/27/2001

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:

Date: 02/17/200/