POIOOO32926

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

| SUBJECT: Affordable Re-Sales Inc. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX) | | | | | |
|---|--|---|--|------------|--|
| | | | 1000037 -03/01/(*****8 | 010106900: | |
| Enclosed is an origin | al and one(1) copy of the article | es of incorporation and a | check for: | | |
| S70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | S78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED | | |
| FROM: | | Sanders (inted or typed) | > | | |
| 12621 VFW Rd. PS = T | | | | | |
| | Dade City | FL. 3356 | 95 ASSEF, | | |
| | 352 - 523 Daytime Tel | -0906 lephone number | | PH 4: 24 | |

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

(My ho)

| ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit | t) |
|--|--|
| ARTICLE I NAME | .22 " 4 " |
| The name of the corporation shall be: | |
| Affordable Re-Sales, Inc. | |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 19691 VFW Rd. Dade City, FL 33535 | |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: | ALCOLAR PROPERTY OF THE PARTY O |
| Mobile Home broker | |
| ARTICLE IV SHARES The number of shares of stock is: | OST 12 |
| 10,000 | |
| ARTICLE V INITIAL OFFICERS DIRECTORS (option of the name(s) and address(es): | ional) |
| ARTICLE VI REGISTERED AGENT The name and Florida street address School | - |
| The name and Florida street address of the registered agent is: | |
| Kimberly L. Sanders | |
| 12621 VFW Rd. | ±30 ° |
| Dade City, FL 33585 ARTICLE VII INCORPORATOR | · — |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator is: | |
| Kimberly L. Sanders | |
| 12621 VFW Rd. Dade City, FL 33525 *********************************** | |
| Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent as | ************************************** |
| Kamberly R. Sanders Signature/Registered Agent | Date Date |
| Signature/Incorporator (Kimberly L. Sanders) | 2/22/01 Date |
| | |