DO100027848 TRANSMITTAL LETTER



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

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				ককককক (U.) J		
SUBJECT:	MACY	(Proposed corpor	Nysell Indexe at a name - must include suf	.)C .		
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:						
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate o	f Status	Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	MACY	Name (Pr	Nysell inted or typed)			
	258	Howa	ard Blvd. ddress	·		
·	Longe	<u>0000,</u> City, S	-F1. 327 State & Zip	.5 <u>ō</u> _		
407-322-8936 Daytime Telephone number						

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

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.



<u>ARTICLE I NAME</u>

The name of the corporation shall be:

Mary K. Hysell, Inc.

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ARTICLE .	II .	PRINCIPAL	OFFICE

The principal place of business and mailing address of this corporation shall be:

258 Howard Blvd. Longwood, Fl. 32750

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Mary K. Hysell 258 Howard Blvd. Longwood, Fl. 32750

ARTICLE V INCORPORATOR

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

MARY K. Nysell 258 Howard Blvd. Longwood, Fl. 32750

Mary K Dysell
Signature/Incorporator

3-/0-01

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

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 3-10-0/
Date