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TRANSMITTAL

LETTER DATE

FILED

01 APR 23 AM 9: 47

SECRE OF STATE TALLAHASSEE, FLORIDA

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

SUBJECT: MISTY K. REBACK, INC

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 X \$78.75 Filing Fee Filing Fee & Certificate

FROM:

Filing Fee & Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

Name (Printed or Typed)

1615 OLD CYPRESS TRAIL

Address

WELLINGTON, FL 33414

City, State, & Zip

561-333-1970

MISTY K. REBACK

Daytime Telephone No

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.

The name of the corporation shall be:

MISTY K. REBACK, INC

ARTICLE II NAME
The principal place of business and mailing address of this comporation shall be:

1615 OLD CYPRESS TRAIL WELLINGTON, FL 33414

ARTICLE III SHARES

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

ONE THOUSAND (1,000) SHARES.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MISTY K. REBACK 1615 OLD CYPRESS TRAIL, WELLINGTON, FL 33414

ARTICLE V INCORPORATOR

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

MISTY K. REBACK 1615 OLD CYPRESS TRAIL, WELLINGTON, FL 33414

ARTICLE VI EFFECTIVE DATE:

The effective date of this Corporation shall be MAY 1, 2001

Signature/Incorporator

Misty K. Reback, President

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. further agree to comply with the provision 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

Misty K. Reback

Date