1990006851

DEPARTMENT OF STATE DIVISION OF CORPORATIONS P. O. BOX 6327 TALLAHASSEE, FL 32314

600004456076----07/02/01--01060--007 *****70.00 *****70.00

SUBJECT:

SUSAN A. HOWELL, INC.

ENCLOSED IS AN ORIGINAL AND ONE COPY OF THE ARTICLES OF INCORPORATION, AND OUR CHECK FOR \$70.00 $\,$

FROM: NAME:

SUSAN A. HOWELL, INC

ADDRESS:

1850 BISCAYNE

CITY:

S. DAYTONA

STATE

FLORIDA, 32119



7 30

ARTICLES OF INCORPORATION OF:

ARTICLE I - NAME

THE NAME OF THIS CORPORATION SHALL BE:

SUSAN A. HOWELL, INC.

ARTICLE II - PRINCIPLE OFFICE

THE PRINCIPAL PLACE OF BUSINES AND MAILING ADDRESS OF THIS CORPORATION SHALL BE:

1850 BISCAYNE S. DAYTONA, FL 32119

ARTICLE III - CAPITAL STOCK

THE NUMBER OF SHARES THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

60 NO PAR VALUE

ARTICLE IV - REGISTERED AGENT

THE NAME AND ADDRESS OF THE REGISTERED AGENT IS:

SUSAN A. HOWELL 1850 BISCAYNE S. DAYTONA, FL 32119 ALBUS SECOND

ARTICLE V - INCORPORATERS

THE NAME (S) AND STREET ADDRESS (ES) OF THE INCORPORATOR (S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

SUSAN A. HOWELL 1850 BISCAYNE S. DAYTONA, FL 32119

THE UNDERSIGNED INCORPORATOR (S) HAS OF INCORPORATION THE15 DAY OF	(HAVE) EXCUTED THESE ARTICLES JUNE, 2001
SIGNATURE: SLUTAN A. HOULL	L_TITLE:PRESIDENT
SIGNATURE:	_TITLE:
SIGNATURE:	_TITLE:
SIGNATURE:	_TITLE:

CERTIFICATION OF DESIGNATION-REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTIONS 607.0501 OR 717.0501, FLORIDA STATUES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA.

I. THE NAME OF THE CORPORATION IS:

SUSAN A. HOWELL, INC.

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT IS:

NAME:

SUSAN A. HOWELL

ADDRESS:

1850 BISCAYNE

CITY/STATE: S. DAYTONA, FL 32119

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: SUSTEM A. TOUTU

