POIODO 71924

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 housand Words Photography SUBJECT: (Proposed corporate name - must include suffig Enclosed is an original and one (1) copy of the articles of incorporation and a check for: □ \$131.25 **\$122.50** \$78.75 Filing Fee, Filing Fee Filing Fee & Certified Copy Certified Copy & Certificate & Certificate ADDITIONAL COPY REQUIRED Name (Printed of typed)

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

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 am familiar with and accept the obligations of my position as registered agent.

Dated 6/26/01

Registered Agent