## P01000074303

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

SUBJECT: (Proposed corpor	rate name - must include suffi	*)	1 K.
	80	<b>0004484</b> ! -07/18/010 *****78.75	1065007
Enclosed is an original and one(1) copy of the article	es of incorporation and a	check for:	, •
\$70.00 \$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: Rome (P	rinted or typed)		
<u> </u>	Oth Street	<u></u>	<del></del>
Decfield City,	State & Zip	33441	
GAVE Daytime T	clephone number	į.	- a -
UTHORIZATION BY PHONE TO CORRECT DATE DOC. EXAM		OI JUL 27 I	Control of the contro
NOTE: Please provide the o		2: 46 STATE LORIDA	7 0001
	<b>8.</b>		272001

## ARTICLES OF INCORPORATION

FILED

National Section 1988

The undersigned incorporator, for the purpose of forming a corporation under the Florida UL 27 PM 2: 46		
ARTICLE I NAME TALLAHASSEE, ILDRIDA TO DO TO THE STATE		
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:		
The principal place of business and maining address of this corporation shall be:  OF SE IOHN SHOWER DESTRICT BOY		
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at any one time is:		
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address of the initial registered agent are:		
Onery I Hospiden aussion sheet Dearfield Bon		
ARTICLE V INCORPORATOR  The name and address of the incorporator to these Articles of Incorporation are:		
Robert Hashagen 29 S.C. 10th Street Deer Ciell But Fl.		
29 S.E. 103N 31111		
Signature/Incorporator Date		
(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

Date