TRANSMITTAL LETTER

01 OCT 12 PH 3: 29

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

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SUBJECT: Riple A & J. Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUPERX)

Enclosed are an ori	ginal and one (1) copy of the arti	cles of incorporation and	a check for:	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: Mayra J. Kiefer Name (Printed or typed)				
2143 Fifth aug. n.				
	ST. Peters 1	State & Zip)	<u>337</u> /3	
	(22) 328-	7663	· · · · · · · · · · · · · · · · · · ·	

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

•	***
ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	010CT12 PM 3:30
ARTICLE I NAME	12 PM 2
The name of the corporation shall be:	30 C
Triple A ; J, Inc.	COLE, TORIO
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	d
8001 N. Dale Mabry, Suite 701	
14mpa, +L 33614	
ARTICLE III PURPOSE	• • •
The purpose for which the corporation is organized is:	
Any and all legal purposes.	
ARTICLE IV SHARES	
The number of shares of stock is:	
1,000.	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s), address(es) and title(s):	-
Clara S. Creighton - President, S	Decretory Measure
. 1	14.7)
Clara S. Creighton - Director	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
Maura J. Kiefer	
2143 FIFTH QUE N.	-
2143 FIFTH QUE N. ST. PETERS BURG, FL 33713	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Maura J. Kieser 2143 Firth Que. N.	· -
ST. Peters burg, FL 33713 **********************************	*******
Having been named as registered agent to accept service of process for the above stated corporati	ion at the place designated in this
certificate, I am familiar with and accept the appointment as registered agent and agree to act in the	his capacity
May ()) ()	10-19-01
Signature/Registered Agent/)	Date
	Daw
Maria) Lule	10-09-01
Signature/Incorporator	Date