850 222 1222

01/23 '02 13:13 NO.535 01/02

200008243

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000021225 6)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : I20000000257

Phone : (850)224-8870

Fax Number : (850) 222-1222

FLORIDA PROFIT CORPORATION OR P.A.

JASON ROSS INC

Certificate of Status	0
Certified Copy	1
Page Count	01.
Estimated Charge	\$78.75

H02000021225 6

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Elorida Business Corporation Act, hereby adopts the following Articles of Incorporation.

The name of the corporation shall be 750N Ross INC

JAN 23 PH 2: 51

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 2038 | NE304UR, #308 Suite
AURITURE FL., 33180-1578

<u>ARTICLE III SHARE</u>S

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:
80381 12 30 41 5 TH 3 V
AURNTUNA FL, 33180-1578
ARTICLE V INCORPORATOR
The name and address of the incorporator to these Articles of Incorporation are:
Lee Hershaw,
20391 NE30 AUC. 74308
AURTURA FL., 33180-1578,
1/23/02
Signature/Incorporator Date

(An additional article must be added if an effective date is requested.)

Maying been named as registered agent and to accept service of process for the above stated corporation at the place designmed in this carlificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to cumply with the provisions of all statutes relating to the proper and complete performance of my duties, and I om familiar with and accept the abligations of my position as registered agent

Signatur Registered Agent

1/23/02