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

300004882683--5 -02/06/02-01027-004 *****70.00 ******70.00

	rate name - must inc		·		
and one(1) copy of the article \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified C	Сору	S Filin	131.25 ng Fee, tified Co Certificat	e
Karen Jackson -					
Name (Printed	l or typed)	·			
1258 Pine Ridge	Circle W.	#A-1		SECR	02 FEB
Address			ETAF	B-6	
Tarpon Springs,	FL 34688		• •	133 107	7
City, State & Zip			STAT	9: 5	
					<i>-</i> -
	and one(1) copy of the article \$78.75 Filing Fee & Certificate Karen Jackson - Name (Printed 1258 Pine Ridge Addre	and one(1) copy of the articles of incorporation \$78.75 Filing Fee & Certificate Karen Jackson - DeGiorgio Name (Printed or typed) 1258 Pine Ridge Circle W. Address Tarpon Springs, FL 34688	and one(1) copy of the articles of incorporation and a c \$78.75 Filing Fee & Certificate Karen Jackson - DeGiorgio Name (Printed or typed) 1258 Pine Ridge Circle W. #A-1 Address Tarpon Springs, FL 34688	and one(1) copy of the articles of incorporation and a check for \$78.75 Filing Fee & Certificate Karen Jackson - DeGiorgio Name (Printed or typed) 1258 Pine Ridge Circle W. #A-1 Address Tarpon Springs, FL 34688	and one(1) copy of the articles of incorporation and a check for: \$78.75

02-12-02

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

ARTICLES OF INCORPORATION

1

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

The Yankee Clipper, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

TARY OF STATE ASSEF FLORIDA

The Yankee Clipper, Inc. 33 N. Garden Ave. #130 Clearwater, FL 33755

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One thousand shares of common stock with a par value of One Dollar per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Karen Jackson - DeGiorgio 1258 Pine Ridge Circle W. #A-1 Tarpon Springs, FL 34688

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Karen Jackson - DeGiorgio 1258 Pine Ridge Circle W. # A-1 Tarpon Springs, Fl 34688

The undersigned in	ncorporator(s) has	(have) executed	these Articles of	of Incorporation th
14th day of _	January	· · · · · · · · ·	2002	
(An additional artic	ele must be added i	if an effective da	ate is requested.)
	Laur	Tacks	on-Du	Lungu
7	1 6	Signa	ture	
_	***************************************	Signa	ture	

Notarization is not required

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

1.	The name of the corporation is The Yankee Clipper, Inc.		_
2.	The name and address of the registered agent and office is:	02 FEB SECRET	
	Karen Jackson - DeGiorgio (NAME)	FEB - 6 AM 9: 51 CRETARY OF STATE LAHASSEE FLORID	
	1258 Pine Ridge Circle W. #A11 (P. O. Box or Mail Drop Box NOT ACCEPTABLE)	4 9: 51	-
	Tarpon Springs, FL 34688 (CITY/STATE/ZIP)		

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) (DATE)