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TRANSMITTAL LETTER

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

900005113089---7 -03/18/02--01046--010 *****78.75 ******78.75

Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$78.75 **□** \$70.00 \$87.50 \$78.75 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED TURN QUEST

Varieted or typed) LOXAHATCHEE, FL 33470
City, State & Zip

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

954- 257-5815

Daytime Telephone number

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I The name of the corporation shall be: TURNQUEST FARMS, INC ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3517 D. ROAD LOXAHATCHEE, FL 33470 ARTICLE III PURPOSE The purpose for which the corporation is organized is: DOING ANY AND ALL LAWFUL BUSINESS SHARES ARTICLE IV The number of shares of stock is: 500 ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): TIFFANY S. TURNQUEST ULCE PRESIDENT 3517 D. RUAU LOXADATCHEE, FC ROLAND D. TURN QUEST, PRESIDENT 3517 0-ROAD LOXATATCHEE, FL 33470 3347*0* REGISTERED AGENT ARTICLE VI The name and Florida street address of the registered agent is: TIFFANY S. TURNQUEST 3517 D. ROAD LOXAHATCHEE, FL 33470 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: TIFFANY S. TURNQUEST 3517 D. ROAD LOXAHATCHEE, FL 33470 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity 3-12-02 Date ghature/Registered Age <u>3 - 12 - 02</u> Date

TIFFANY S. TURNQUEST