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TRANSMITTAL LETTER

FILED

02 MAR 18 AM 10:02

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

400005114074--3

SUBJECT:

TRUEBLOOD PROPERTIES INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

03/18/02--01083--007
*****78.75

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

DAVID TRUEBLOOD

Name (Printed or typed)

3124 PINTO DR

Address

KISSIMMEE, FL 34746

City, State & Zip

407-467-2044

Daytime Telephone number

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

D. WHITE MAR 25 2002

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

TRUEBLOOD PROPERTIES

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3124 PINTO DR
KISSIMMEE, FL. 34746

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE

ARTICLE IV SHARES

The number of shares of stock is:

50,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

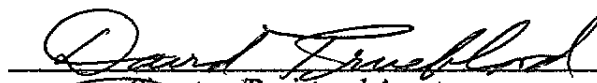
DAVID TRUEBLOOD
3124 PINTO DR
KISSIMMEE, FL 34746

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DAVID TRUEBLOOD
3124 PINTO DR
KISSIMMEE, FL. 34746

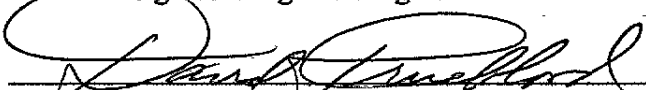
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

3-14-02

Date



Signature/Incorporator

3-14-02

Date