TRANSMITTAL LETTER

lahassee, FL 32314

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

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

\$87.50 ~

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Name (Printed or typed)

365 Venetian Blud

3t. Augustine PL. 32095-8241
City, State & Zip

904-804-3857 FAY 904-810-5881 Daytime Telephone number

- JUN 2 6 2002

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



ARTICLES OF INCORPORATION

NAME

The name of the corporation shall be:

ARTICLE I

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

ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 203 WEST KING STREET P.O. BOX 4138		
St. Augustine Fl. 32084 St. Augustine Fl.	32085	
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any 100 Shares		. ·
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: Namey J. Burn 365 Venetran Bud. St. Augustine Fl. 32095-824/ ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are: Cincly A. Kern 34 South Dixie Lay St. Augustine Fl. 32084	SECRETARY OF SHALL DIVISION OF CORPORATIONS 02 JUN 25 AM 9: 46	
Cidy 1 4 -00 -04-02	·	
Signature/Incorporator Date	•	
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(An additional article must be added if an effective date is requested.)

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/Registered Agent Date