121400100C

TRANSMITTAL LETTER

Department of State

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314				
SUBJECT: JUNING POINT ZONE, INC. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)				
90007771119 -09/16/0201061015 *****87.50 ******87.50				
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
S70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate	
		ADDITIONAL COPY REQUIRED		
FROM:	16522 JN	J. Dixor nted or typed) 1. 114 Cf dress	TALLAHASS	2002 SEP 16

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

ARTICLES OF INCORPORATION The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation. ARTICLE I NAME

2002 SEP 16 PM 3: 01

The name of the corporation shall be:

Turning Point Zone: Inc

TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

16522 S.W. 11H Cf MLame FL. 33157

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

1,000 Shares

Par value of \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Joyce M. Dixon

16522 DW. 114 ct Mame FL. 33157

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Colin N. DIXON

16522 S.W. 114 ct Miamu, FL 33157

Colin D. Kon

9/13/02/

(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

13/00

Date