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Florida Department of State

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To:

Division of Corporations

Fax Number 1 (850)205-0381

From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number : 072450003255 Phone : (305) 634-3694

Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

j. crawford enterprises, inc.

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Certificate of Status	0
Certified Copy	1
Page Count	04
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ARTICLES OF INCORPORATION

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J. CRAWFORD ENTERPRISES. INC

The undersigned incorporator(s), for the purpose of forming a Profit Corporation under Chapter 607 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of this corporation shall be:

J. CRAN Ford Enterprises, INC.

ARTICLE II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

ARTICLE III

The principal place of business of this corporation is:

PMB Box 230
MIQNI, FL 33189
ARTICLE IV

The general nature of business of this corporation is to transact any and all lawful business.

ARTICLE V

The aggregate number of shares which this corporation shall have authority to issue are / soo shares having an individual par value of \$ /

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Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE VI

The name and street address of the initial Registered Agent of this corporation shall be:

The name and address of the initial board of director(s) shall be:

James E. Crawford 20547 Old Cutter Read PMB Box 230

ARTICLE VIII

The name and address of the incorporator executing these Articles of Incorporation is:

> 205 47 O/A Ca Miani, FL 33189

The undersigned has executed these Articles of Incorporation this 7

day of Februa

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

J. CRANFORD Enterprises, INC.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, 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.

REGISTERED AGENT

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