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TRANSMITTAL LETTER

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

SUBJECT:	PKerbrush Fa	rm, Inc.			
SUBJECT: Kerlowsh Jarm, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
Enclosed are an orio	inal and one (1) copy of the arti	cles of incorporation and	l a check for		
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:					
\$70.00	□ \$78.75	□ \$78.75	\$87.50		
Filing Fee	Filing Fee	Filing Fee	Filing Fee,		
	& Certificate of Status	& Certified Copy	Certified Copy		
			& Certificate of		
		ADDITIONAL CO	Status		
ADDITIONAL COPY REQUIRED					
FROM: Gary P. Smithson					
Name (Printed or typed)					
1505 Willingham Road					
Address					
Choloota, FL 32766					
City, State & Zip					
Daytime Telephone number					

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) The name of the corporation shall be: Pkerbrush Farm, Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1505 Willing ham Road Chuluota, 7L 32766 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Consulting services and any other lawful lousiness activities. ARTICLE IV SHARES 1,000 The number of shares of stock is: ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Gary P. Smithson P, UP, TAS 1505 Willing ham Road Chulusta, FL 32766 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Gary P Smithson 1505 Willing ham Road Chulusta, 76 32766 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Gary P. Smithson Road Chulusta, 7C 32766 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