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### TRANSMITTAL LETTER

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

SUBJECT:	Four Smiles Realty Inc.			
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
Enclosed are an original	inal and one (1) copy of the artic	cles of incorporation and	1 a check for:	
□ \$70.00	<b>☎</b> \$78.75	\$78.75	<b>□</b> \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
1 2	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
			Status	
		ADDITIONAL CO		
~~ ~	Dawhawa Mazzacz			
FROM:	Barbara Mayner Name (Printed or typed)			
175 5th Street SW, Ste 102 Address				
Winter Haven FL 33880				
-		City, State & Zip		
-	Davtime T	elephone number		

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

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#### ARTICLES OF INCORPORATION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

. OF

#### Four Smiles Realty Inc.

THE UNDERSIGNED, being over the age of eighteen years, in order to form a corporation pursuant to the provisions of the Corporate Code, hereby certifies as follows:

### Article I Identification

The name of the corporation, hereinafter referred to as the "Corporation," is Four Smiles Realty Inc.

### Article II Period of Existence

The period during which the corporation shall continue is perpetual.

## Article III Registered Office and Registered Agent

The address of the initial registered office of the Corporation is 175 5th Street SW, St 102, Winter Haven FL 33880 and the name and address of the initial registered agent therein and in charge thereof, upon whom process against the Corporation may be served, is Barbara Mayner, 175 5th Street SW, Ste 102, Winter Haven FL 33880. The mailing address for the Corporation is 175 5th Street SW, Ste 102, Winter Haven FL 33880.

### Article IV Purpose

The purpose of the Corporation is to engage in any or all lawful business for which corporations may be organized under the provisions of the General Corporation Law of Florida.

### Article V Shares

The total authorized capital stock of the Corporation is 100 shares having a Par Value of \$0.01. All or any part of said shares may be issued by the Corporation from time to time and for such consideration as may be determined upon or fixed by the Board of Directors, as provided by law.

### Article VI Incorporator's Address

The name and post office address of the Incorporator(s) and initial Director(s) of the Corporation is as follows:

Barbara Mayner
175 5th Street SW, Ste 102
Winter Haven FL 33880
The effective date of this Article of Incorporation shall be \_\_

IN WITNESS WHEREOF, the undersigned Incorporator(s) has caused this Article of Incorporation to be executed as of  $\frac{2000}{2000}$ , 2003.

Incorporator

STATE OF FLORIDA )
COUNTY OF POLK )

2003.

The forgoing Articles of Incorporation were acknowledged before me, this 2 day of 2003.

NOTARY PUBLIC State of Florida

My Commission Expires:



### ACCEPTANCE BY REGISTERED AGENT

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

Signature/Registered Agent

Date

CRETARY OF STA