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

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

\$70.00

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FROM:

BETH MORAN

Name (Printed or typed)

Holl Leeta Lare

Address

Saracola, Storida 34234

City, State & Zip

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) ARTICLE I NAME The name of the corporation shall be: Beth MORAN, RNC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Helle Lectahane Bando ta Stonda ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: CONGULTATION ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s); Lectahare REGISTERED AGENT ARTICLE VI The name and Florida street address of the registered agent is: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: 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/Incorporator

Date