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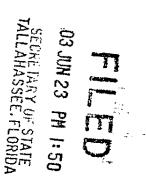
(Requestor's Name)				
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PICK-UP WAIT MAIL				
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## TRANSMITTAL LETTER

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

SUBJECT: BECCH LASSITER INC.  (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
(PROPOSED CORPORATE NAME MUST INCLUDE SUFFIX)				
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL COR	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:  REBECCA LASSITER  Name (Printed or typed)				
243 BRAZILIAN CIRCLE				
Port St. Lucie, FL 34952				
(77a) 530-7456 OR (77a) 461-6000  Daytime Telephone number				

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

## In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: BECCA LASSITER INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 243 BRAZILIAN CIRCLE Port St. Lucie, FL ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: To conduct For profit business ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): REGISTERED AGENT The name and Florida street address of the registered agent is: LASSITER REDECCA 243 BRAZILIAN CIRCLE Porct St. Lucie, FL 34952 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: LASSI+ER REBECCA BRAZILIAN CIRCLE brt St. Lucie, F( 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 Agen

ARTICLES OF INCORPORATION

Signature/Incorporator