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(Requestor's Name)

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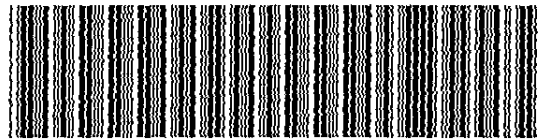
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

from 9/14

TRANSMITTAL LETTER

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

SUBJECT: Ratliff & Associates, Inc.

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 & Certified Copy

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

FROM:

Ratliff & Associates, Inc.
(Printed or typed)

7342 S. Broad Street
Address

Brooksville, FL 34601
City, State & Zip

(352) 797-5441
Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorporation, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Ratliff & Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**7342 S. Broad Street
Brooksville, FL 34601**

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and florida street address of the initial registered agent are:

**NELSON CAPORICE
C/O ALBANO & ASSOCIATES
1506 E. MARTIN L. KING BLVD.
TAMPA, FL 33610
(813)247-2060**

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

**Don Ratliff
4224 Tipperary Lane
Brooksville, FL 34601
(352)754-1189**

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TALLAHASSEE, FLORIDA


Signature/Incorporator

September 10, 2003

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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



Signature/Registered Agent

September 10, 2003

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA