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(Requestor's Name)			
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DIVISION OF COM GRATION

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## TRANSMITTAL LETTER

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

SUBJECT: FTD Physfer: Na Co, elne.			
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
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 & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy	
		& Certificate of Status	
ADDITIONAL COPY REQUIRED			
FROM: FTD Plaster, Ng Co, Inc. Name (Printed or typed)			
3406 STONELER ROAD			
TALLAHASSEE Florida, 32303 City, State & Zip			
850-931-369 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) ARTICLE I NAME The name of the corporation shall be: YlAstering CO, INC ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3406 STONELER ROAD TALLAMASSEE, FI 32303 ARTICLE III PURPOSE The purpose for which the corporation is organized is: The number of shares of stock is: ONE hundred Shake INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: JERILYN RODINSON 3406 STONFLER RB TALLAHASSEE, FI 32303 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: ROD:NSON 3406 STONELER RD TALLAHASSEE, FI 32303 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

Signature/Incorporator