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DIVISION OF CORPORATION

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SECRETARY OF STATE DIVISION OF SORPERATIONS

Ban 1/1/28

TRANSMITTAL LETTER

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: **□** \$78.75 \$78.75 \$87.50 \$70.00 Filing Fee Filing Fee, Filing Fee Filing Fee & Certified Copy & Certificate of Status Certified Copy & Certificate of ADDITIONAL COPY REQUIRED FROM: AKKY D. CRUM

Name (Printed or typed)

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

850-008-6980 Daytime Telephone number

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	ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	. ".	03 O
	ARTICLE I NAME The name of the corporation shall be:		CRETARN TOUR OF CE
	LDC. SERVICES, INC.	-	YOF STATE ON PM 1: 13
	ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 931 REDBUD DR. TALL. FL. 32303		I ON
	ARTICLE III PURPOSE The purpose for which the corporation is organized is: ANY AND ALL LEGAL BYSSINESS IN THE STATE OF	of Flo	PRIDA.
	ARTICLE IV SHARES The number of shares of stock is: 100	·.	a e
	ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): LAKRY D.CKUM 931 KEDBUD DR. PRESIDENT VICE PRESIDENT SAME	trum	JR.
	ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: LARRY D. CKUM [93] REDBUD DR. TALL, FL, 32		
	ARTICLE VII INCORPORATOR The name and address of the Incorporator is: LARRY D. CKUM 931 REDBUD DR. TALL. FL. 3	7.30 3	
	**************************************	n at the plac	
	Signature/Registered Agent Date	-28-	03
		9-28-0	
	Signature/Incorporator Date	e	