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(Requestor's Name)			
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PICK-UP WAIT MAIL			
(During Fully Mars)			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer;			





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J.

TRANSMITTAL LETTER

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

SUBJECT:	(al & Duff	lees, Inc		
	(PROPOSED CORPORA)	IE NAME – <u>MUST INCLI</u>	UDE SUFFIX)	
Enclosed are an orig	rinal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Carl & Du Name/	Heef Carl	E. Duffey	
205 Coue Drive				
	Sat sur	na Fla 3 State & Zip	32189	
	904 2 Daytime T	84 4231 elephone number		

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

ARTICLES OF INCORPORATION OF





The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I - NAME

The name of the corporation shall be:

Carl E. Duffey, Inc.

ARTICLE II - NATURE OF BUSINESS

This corporation may engage in or transact any and all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, county, territory or nation.

ATRICLE III - CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any time is 100 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV - ADDRESS

The street address of the initial registered office of the corporation shall be:

205 Cove Drive Satsuma, Fla. 32189

And the name of the initial Registered Agent for the corporation at that address is:

Carl E. Duffey

ARTICLE V – SPECIAL PROVISIONS

The stock of the corporation is intended to qualify under the requirements of Section 1244 of the Internal Revenue Code and the regulations issued thereunder. Such actions as may be necessary shall be deemed to have taken by the appropriate officers to accomplish this compliance.

ARTICLE VI - TERM OF EXISTENCE

This corporation shall exist perpetually.

ARTICLE VII - LIMITATION OF LIABILITY

Each director, stockholder and officer, in consideration for his services, shall, in the absence of fraud, be indemnified, whether then in office or not, for the reasonable cost and expenses incurred by him in connection with the defense of, or for advice concerning any claim asserted or proceeding brought against him by reason of his being or having been a director, stockholder or officer of the corporation or of any subsidiary of the corporation, whether or not wholly owned, to the maximum extent permitted by law. The foregoing right of indemnification shall be inclusive of any other rights to which any director, stockholder or officer may be entitled as a matter of law.

ARTICLE VIII – NAMES OF OFFICERS

Carl E. Duffey, President

ARTICLE IX - EFFECTIVE DATE

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal on this

The effective date of the incorporation will be January 1, 2004.

BEVERLY KIRKLAND
MY COMMISSION # DD 031407
EXPIRES: June 5, 2005
1-800-3-NOTARY FL Notary Service & Bonding: Inter-

My Commission Expires:

4 day of $10\sqrt{}$, 2003.	
	Incorporator:
State of Florida)) ss.	
County of Putman)	
The foregoing instrument was acknowledge 2003 by: CALEDUFFE	who is/are personally known by
me or who has/have produced: Dion-125 did not take an oath. Drivers L	S4-103-0 as identification and who icense
	Notary Public State of Florida

DESIGNATION OF AND ACCEPTANCE BY REGISTERED AGENT

The following is submitted in compliance with the laws of the State of Florida.

CARL E. DUFFEY, INC.

A corporation organizing under the laws of the State of Florida, with its principal offices located at:

205 Cove Drive Satsuma, Fla. 32189

has named Carl E. Duffey, whose address is 205 Cove Drive Satsuma, Florida 32189, as its Agent to accept service of process within this state.

ACCEPTANCE:

I agree as Registered Agent to accept service of process; to keep the office open during prescribed hours; to post my name, and any other officers of said corporation authorized to accept service of process at the above designated address, in some conspicuous place in the office as required by law.

200 E 1 1) W
State of Florida)
County of Putman)
The foregoing instrument was acknowledged by me this 19 day of 10 10 2003 by: CALLED LAFFEY who is/are personally known by me or who has/have produced: Diod - 12 <- 54-103-0 as identification and who did take an oath. Driver's License Notary Public State of Florida
My Commission Expires:

Registered Agent:____

BEVERLY KIRKLAND
MY COMMISSION # DD 031407
EXPIRES: June 5, 2005
1-800-3-NOTARY FL NOTARY Service & Bonding, Inc.