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TRANSMITTAL LETTER

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

SUBJECT: <u>KE</u>	eth Hans	co	INC.	· · ·	
•	(PROPOSED C	ORPORAT	E NAME – <u>MUST INCLI</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy	of the articl	es of incorporation and	a check for:	
	⊈ \$78.75				
□ \$70.00		i	□ \$78.75	□ \$87.50	
Filing Fee	Filing Fee & Certificate of Sta	nie	Filing Fee & Certified Copy	Filing Fee, Certified Copy	
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Name (Printed or typed)					
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52210 Christiancy AVE.					
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	HORT DRAL	City, S	Fla. 3816 tate & Zip	8 <u>7 </u>	
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	386-587	-154	3		
Daytime Telephone number					

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chap		FILED
ARTICLE I NAME The name of the corporation shall be:		03 DEC 31 AM 7: 19
Keith Hanson In	10.	SECRETART OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address 5226 CINRISTICION A PORT ORONAE, FIG. 3	ve.	
ARTICLE III PURPOSE The purpose for which the corporation is org SubContiguating Car		
ARTICLE IV SHARES The number of shares of stock is: 100		
ARTICLE V INITIAL OFFICERS A List namc(s), address(es) and specific title(s) PRESIDENT - KEITH H TREASLUZER - KEITH H	: anson	, <u>.</u>
ARTICLE VI REGISTERED AG The name and Florida street address of the KEITH HONSON 5006 CHRISTIANOU AN PORT ORONGE, Fla. 3 ARTICLE VII INCORPORATOR	registered agent is:	
The name and address of the Incorporator is: KEITH HANSON 5006 CHRISTIANOU AV POIL OPANGE, FIA. 36 ************************************	197	******
Having been named as registered agent to accept serv certificate, I am familiar with and accept the appointm		
Viewth Hanson Signature/Registered Agent		

Keuto Hanson Signature/Incorporator