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TRANSMITTAL LETTER

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

SUBJECT:	JJ's Cur		· /
Enclosed are an orig	(PROPOSED CORPORAT	les of incorporation and a	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	Bradenton City, 941-8	John Jac (Printed or typed) Weola Standardess Flag 342 State & Zip Telephone number	207

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

.	
Lamier de op videophen Laver	
ARTICLES OF INCORPORATION	TON JUNIO
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: The name of the corporation shall be:	TON CANER
ARTICLE I NAME	July 2 D
The name of the corporation shall be:	+ Trois B+
S S, S C W 7	TO AC
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 4317 min	
The principal place of business/mailing address is: 73//	1014 ST,
Bradenson,	F1 34207
ARTICLE III PURPOSE	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
The purpose for which the corporation is organized is: To transa	et any une all
LAWFUL Business For which corpora	utions maybe
Incorporated under Florida beneral	Corporation Act.
ARTICLE IV SHARES The number of shares of stock is: 1000 Shares of Comm	now CTOIN
Having a nominal or par value	or one clos spershare
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	- House Diagone
This Corporation Shall have the	s (sound in the end
This Corporation shall have the f Name TREFTARY John JACKSON 4817 Mine	President
Teffer Tol T VI 1/0/2 00/1	1. C- Redude El 3 428
	DIA ST. BRANCH INC.
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	
The hame and Fiorida street address of the registered agent is:	0 2 1 2134
JEFFREY John Jackson 4817 MINEOLA	St. Bradenter, El 34-
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
- 10 WALT Mind	C Bradenton, F (342)
JASFRey John Jackson 4817 Mineolo	(- 1,
**************************************	**************************************
certificate, Lam families with and accept the appointment as registered agent and agree to	
(// /_	T 172 med
Signature/Registered Agent	June 17,2004 Date
agnorate Agent	
(/18/)/-	June 17 2004

Date

Signature/Incorporator