## P0400010016/

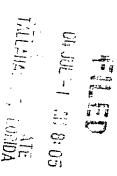
(Requestor's Name) (Address) (Address)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
Special monactions to 1 ming Officer.			

Office Use Only



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06/24/04--01019--007 \*\*78.75



01-24396 TA7/10/08

## TRANSMITTAL LETTER

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

. فيس ن

Enclosed are an orig	inal and one (1) copy of the arti-	cles of incorporation and	l a check for:
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
	Ragon		ع سو د اسح
FROM:	DARRETT Name	(Printed or typed)	74.3
•	7/38 7	RYSA1L Address	CÍRCLE
-	TAMPA	FL. 3.	3607
-	813.2	27 - 9818	<u></u>

SUBJECT: SOJURN 51, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 24, 2004

BARRETT A KEYS 7138 TRYSAIL CIR TAMPA, FL 33607

SUBJECT: SOJOURN 51, INC. Ref. Number: W04000024398

We have received your document for SOJOURN 51, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Document Specialist New Filings Section

Letter Number: 704A00041738

RECEIVED

The name of the corporation shall be:	04 JUL -1 AM 8: 05
SOJOURN 51, INC.	Additionally of the south
ADMICE DE TOURS DE LE CONTROL DE LA CONTROL	TALLAHASSLÉ, FLORIDA
ARTICLE II PRINCIPAL OFFICE  The principal place of husiness/mailing address is:	
The principal place of business/mailing address is:  324 N. DALE MABRY	
TAMPA FL. 33609	
The purpose for which the corporation is organized is:	
The purpose for which the corporation is organized is:  SALES AND MARKETING	
ARTICLE IV SHARES	
The number of shares of stock is: 500	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR	ne .
List name(s) address(es) and specific title(s):	
List name(s), address(es) and specific title(s):  SARRETT H. KEYES  7138 TRYSAIL CIRCLE	
TAMPA FL. 33607	
TAMBA FL. 33007	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
DARRETT OF	A. Keyes YSAIL CIRCLE FL. 33607
7/38 /K	b) 23/47
The name and address of the Incorporator is:  139 RRET PLANT CIRCLE  7/38 TRUSHIL CIRCLE	
TAMPA PL. 3360	7.
**************************************	**************************************
certificate, I am fashillar with and accept the appointment as registered agent and a	gree to act in this capacity
// world (N/M	
Signature Registered Agent	Date
Land Il Bur	6-20-04
Signature/Incorporator	Date

FILED

\* 1 \*\*

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

6-27-04

I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES OF REGISTERED AGENT.

BARBETT A. KEY