

**P0400011709/**

Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

**FLORIDA PROFIT CORPORATION OR P.A.**

**YB NORMIL II, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

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158/11/04

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

### ARTICLE I NAME

The name of the corporation shall be: **YB NORML IL, INC.**

### ARTICLE II PRINCIPAL OFFICE

The principal place of business of this corporation shall be:  
**9820 US 19 NORTH  
 PORT RICHEY, FL 34668**

### ARTICLE III SHARES

The number of shares of stock this corporation is authorized to have outstanding at any one time is:  
**One-Thousand (1,000) Shares  
 Common Stock**

### ARTICLE IV INITIAL REGISTERED AGENT

The name and Florida street address of the initial registered agent are:  
**Julie O'Steen  
 7220 Plathe Road  
 New Port Richey, FL 34653**

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:  
**Julie O'Steen  
 7220 Plathe Road  
 New Port Richey, FL 34653**

### ARTICLE VI OFFICERS

The officers of the corporation are: **Julie O'Steen - President/Secretary/Treasurer**


### ARTICLE VII DIRECTORS

The directors of the corporation are: **Julie O'Steen - Director**

  
 \_\_\_\_\_  
 Signature/Incorporator

**8.9.04**  
 \_\_\_\_\_  
 Date

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

  
 \_\_\_\_\_  
 Signature/Registered Agent

**8.9.04**  
 \_\_\_\_\_  
 Date

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