P04000149177

(Requestor's Name)
(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. Per K.B. will wait, Customer States that he has only the one Name 1: Sted on articles.
(wow)



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DEPART NE STATE

VISION OF THE STATE

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TRANSMITTAL LETTER

Department of State

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SUBJECT: Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$78.75 \$87.50 Filing Fee & Certified Copy Filing Fee Filing Fee Filing Fee, & Certificate of Status Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED 850 - 980 -23 40 Daytime Telephone number

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

ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME	04 NOV -1 PM 12: 46
The name of the corporation shall be:	SECRETARY OF STATE
Ansun, Inc.	TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 800 Ocale vol. 300 107	
Tallahassee, FL 32304	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	· · · · · · · · · · · · · · · · · · ·
Any legal business	
ARTICLE IV SHARES The number of shares of stock is: 100	
List name(s), address(es) and specific title(s): Ceo/president Pierre god Ocala rd 300-107 Tallahassee, FL 32304 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of Pierre	
800 Ocah rd 300-107	
Tallahassee, F1 32304	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	1.2
^	•••
Pierre 800 cala rd 300-107 Tallahassee, FL 32304 ************************************	
Tallahassee, FL 32304	*****
Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent and	e stated corporation at the place designated in this l agree to act in this capacity
AD'	11/1/04
Signature/Registered Agent	Date
• / /	/ / /

Signature/Incorporator