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11/12/04

TRANSMITTAL LETTER

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

SUBJECT: LSB Div	versified, Inc.		
 -	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUBFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l a check for:
\$70.00	\$78.75	\$78.75	2 \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
3.55	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
		Status ADDITIONAL COPY REQUIRED	
FROM: Lev	well S. Butler		
1 NOW	Name	e (Printed or typed)	<u></u>
	226 E 2nd Place		
		Address	
	Panama City, FL 32401		
		, State & Zip	
	(9E0)794 0090		
	(850)784-9929 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)

ARTICLE I NAME

The name of the corporation shall be:

LSB Diversified, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

226 E 2nd Place Panama City, Fl 32401

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Internet Sales

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ARTICLE IV SHARES

The number of shares of stock is: 100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Lewell S. Butler President 226 E 2nd Place Panama City, FL 32401

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Lewell S. Butler 226 E 2nd Place Panama City, FL 32401

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lewell S. Butler 226 E 2nd Place Panama City, FL 32401

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Lewell A. Butler	11-7-04
Signature/Registered Agent	Date
Lewell S. Buth-	11-7-04
Signature/Incorporator	Date