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TRANSMITTAL LETTER

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

SUBJECT: A TO Z PRODUCE CO. INC. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)				
Enclosed are an orio	inal and one (1) copy of the art			
S70.00 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	
FROM: JAMES L. MORGAJ Name (Printed or typed) 9723 Cowels RD. Address				
	FOUDTAIN FI-			
850-769-9483 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: ATOZ PRODUCE CO. INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 9723 Cowels RD. FOULTAIN F1- 32438 ARTICLE III PURPOSE The purpose for which the corporation is organized is: PROFIT ARTICLE IV SHARES The number of shares of stock is: (DYE) ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): JAMES L. MURGAN 9723 Cowels RD. FOUNTAIN F1. 32438 ARTICLE VI REGISTERED AGENT

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

JAMES L- MORGAN 9723 Cowell RD. FOUNTAIN Fl. 32438

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMES L. MORGAN 9723 Cowels Ris. FOUNTAIN F1- 32438

a how wanted as registered agent to accout 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 a	
Sant M.	11-24-04
Signature/Registered Agent	Date
Sas I M.	11-24-04
Signature/Incorporator	Date
JAMES L- MORGED	