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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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Special Instructions to I	Filing Officer:	
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TRANSMITTAL LETTER

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

SUBJECT:	HIS HAIT WILLIAM (PROPOSED CORPORA	THE NAME - MUSTINGL	UDE SUFFIX)
	0		
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d 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
FROM:	Shanon Ellis	S	•
-	5026 Vedda Sa	(Printed or typed)	
_	Tallahassee Fi	323/19 State & Zip	
-	850 - 562 - 1013 Daytime T	elephone number	

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
The name of the corporation shall be: Ellis Hail Wign, MC.	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Tallohassel, Fi 32309	-10
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
ARTICLE IV SHARES The number of shares of stock is: 100	SECRETARY OF SERVISION OF SCREEN
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Shannon Elis President Soal Velda Dary Ka. Tallahassee, IL 3339	STATE ORATIONS
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Sharp Ellis Sharp Ed Sharp Ellis Sharp Ed ARTICLE VII INCORPORATOR Sharp Ellis The name and address of the Incorporator is: Sharp Ellis Sharp Ellis Sharp Ell	

Having been numbed as registered agent to accept service of process for the above stated corporation at the placertificate, I am familiar with and describ the appointment as registered agent and agree to act in this capacity	e /

ARTICLES OF INCORPORATION