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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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(SAMPLE LETTER OF TRANSMITTAL)

DATE

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

Tallallassee, PL 32314	
Re: PANLANUS;	A , Inc.
Gentlemen:	
Enclosed please find the original and one copy of check in the amount of \$122.50.	the Articles of Incorporation, together with my
This represents the cost of the Filing Fees, Certific Registered Agent Designation for the above name	- ·
Very	truly yours.
	Fare M. Rule & St. (Individual's Name)
	PAULANUSA, INC. (Name of Corporation)
[MAILING ADDRESS OF CORPORATION
	105 TABLI TRAIL
	NELROSE, FL 32666
ľ	

(386) 659-2082

Area Code

* * *	ARTICLES OF INCORPORATE	ION
PANLANUSA,	of	SECRETARY OF STATE DIVISION OF COPPORATIONS
YANLANUSH,_	LNC.	06 DE DO
	(name of corporation)	04 DEC 10 PM 2: 35
The undersigned acting as the in the following articles of incorporation	corporators of a corporation under the Florion for such corporation:	da Business Corporation Act, adopt(s)
	ARTICLE I - CORPORATE NAME	
The name of the corporation is:	PANLANCISA, INC.	
	ARTICLE II - DURATION	
This corporation shall exist perpendicular	etually unless dissolved according to Florida	a law.
	ARTICLE III - PURPOSE	
The corporation is organized for United States and the State of Florida.	the purpose of engaging in any activities or	business permitted under the laws of the
	ARTICLE IV - CAPITAL STOCK	
The corporation is authorized to	issue _500shares of common stock,	par value \$ 1.00 per share.
The street address of the initial p	ARTICLE V - INITIAL PRINCIPAL OF Interior of the principal office and, if different, the mailing	
STREET ADDRESS 105 7	ABU TRAIL	
CITY MELROSE	FLORIDA	ZIP 31 666
Mailing address, if different		2000
STREET ADDRESS		
CITY	FLORIDA	ZIP
	LE VI - INITIAL REGISTERED OFFICE	

MELROSE

NAME

CITY

ADDRESS

FLORIDA

ZIP 32666

NAME PAUL N. ARLEDG	E	
ADDRESS 105 TABLE TA	_	
CITY MELEOSE	STATE FLORIDA	ZIP.32666
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
The names and addresses of the incorporators		ZIP ws:
The names and addresses of the incorporators NAME PAUL N. ARLEDGO	ARTICLE VIII - INCORPORATORS s signing these Articles of Incorporation are as follo	
The names and addresses of the incorporators NAME PAUL N. ARLEDGE ADDRESS 105 JABIL 1 A	ARTICLE VIII - INCORPORATORS s signing these Articles of Incorporation are as follo	ws:
The names and addresses of the incorporators NAME PAUL N. ARLEDGO ADDRESS 105 JABIL 1 A CITY MELROSE NAME ADDRESS	ARTICLE VIII - INCORPORATORS s signing these Articles of Incorporation are as follo E A/L STATE FLORIDA	ws:
The names and addresses of the incorporators NAME PAUL N. ARLEDGE ADDRESS 105 JABIL 1 A CITY MELROSE NAME	ARTICLE VIII - INCORPORATORS s signing these Articles of Incorporation are as follo	ws:
The names and addresses of the incorporators NAME PAUL N. ARLEDGE ADDRESS 105 TABIL TE CITY MECROSE NAME ADDRESS CITY NAME	ARTICLE VIII - INCORPORATORS s signing these Articles of Incorporation are as follo E A/L STATE FLORIDA	ws: ZIP 3Z666
The names and addresses of the incorporators NAME PAUL N. ARLEDGE ADDRESS 105 JABIL TR CITY MECROSE NAME ADDRESS CITY NAME ADDRESS	STATE STATE	zip 3Z666
The names and addresses of the incorporators NAME PAUL N. ARLEDGE ADDRESS 105 TABIL TE CITY MECROSE NAME ADDRESS CITY NAME	STATE	ws: ZIP 3Z666

_(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

PANLANUSA. INC.			
(name of corporation)			
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:			
The above corporation, organized under the laws of the State of Florida with its registered offic			
as indicated in the Articles of Incorporation at			
MELROSE, FLORIDA 32666			
has named Paul N APLEDSE			

located at the aforesaid address, as its registered agent to accept service of process within this

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.

state.