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04 DEC 23 MIII: II SEÇRETARY OF STATE

TRANSMITTAL LETTER

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

SUBJECT: PHASE IT DEVELOPERS INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l 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: _	PAUL S. HOLMES
	Name (Printed or typed)
	24 PLANTERS CIR
	Address
	QUINCY FL 32352 City, State & Zip
	City, State & Zip
	850 - 528-0790 Daytime Telephone number
	Daytime i elephone 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: PHASE IL DEVELOPERS ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 24 PLANTERS CiR.

QUINCY, FL. 32352

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL UNLAWFUL

BUSINESS

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s):

PAUL SYLVESTER HOLMES PRES-

PAUL SILVESTER HOLMES PRES. 24 PLANTERS CIR QUINEY, FL. 32352

ARTICLE VI REGISTERED AGENT

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

24 PLANTERS CIR

QUINCY, FL. 32352

SHARES

ARTICLE IV

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: PAUL S. Holme S

24 PLANTERS EIR QUINCY FL. 32352

make EPFECTIVE DATE 1-1-

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

Signature/Registered Agent

Lauf S. Holman

12-23-04 Date

13-23-04 Date