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TRANSMITTAL LETTER

Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Subject:	
Enclosed are an or check for:	iginal and one (1) copy of the articles of incorporation and a
\$70.00	\$78.75 \$122.50 \$131.25
FROM:	Novua A. Martin (Name - printed or typed)
	P.O. Box 184
	Bushnell, Fl. 33513
	(City/State/Zip) 352-305-4919 (Daytime Telephone #)

FILED

ARTICLES OF INCORPORATION 2005 JAN 12 P 3: 24			
OF Norma A. Martin , INGLAHASSEE, FLORIDA			
ARTICLE I			
The name of the corporation shall be: Norma A Martin, Inc.			
ARTICLE II			
The principal place of business and mailing address of this corporation shall be: 1995 SE 25th Way Bushnell, Fl. 33573 P.O. Box 184 Bushnell, Fl. 33573			
<u>ARTICLE III</u>			
The number of shares of stock that this corporation is authorized to have outstanding at any one time is <u>ICC</u> with a par value of <u>NA</u> each.			
ARTICLE IV			
The name and address of the initial registered agent is:			
William Sembower			
880 N Hain St.			
byshnell, Fl. 33513			

ARTICLE V

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Norma A Martin 6990 SE ZSth Way Bushnell, Fl. 33513

Signature

Incorporation this 3 day of January, 100 7	
Nome a Maten	
Signature Signature	
C'anadana	
Signature	

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the Registered Office/Registered Agent, in the State of Florida.

- 1. The name of the corporation is: Novue A. Hartin Itc.
- 2. The name and address of the registered agent and office is:

William Sembower 800 N. Hain St. Bushuell, Fl. 33513

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.

(Signature)

(Date)

TILEU 2005 JAN 12 P 3 21 SECRETARY OF STATE