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TRANSMITTAL LETTER

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

SUBJECT:	THE HOLLOWAY COMPA		UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	les of incorporation and	l a check for:	1
\$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 PPY REQUIRED	
FROM:	2103 GERALO LAI Ā LYNN HAVEN, FL	Printed or typed) NE ddress		FILED 05 JAN 31 PH 2: 33
	850-248-6002	State & Zip	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	M W

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, herby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of corporation shall be:

THE HOLLOWAY COMPANY, INC.

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: Mailing Address Business Address

2103 GERALO LANE LYNN HAVEN, FL 32444 -SAME-

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1,000)

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

WILLIAM R. HOLLOWAY, II 2103 GERALO LANE LYNN HAVEN, FL 32444

INCORPORATORS

The name and address of the incorporator to these Articles of Incorporation are:

WILLIAM R. HOLLOWAY, II 2103 GERALO LANE LYNN HAVEN, FL 32444

INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

WILLIAM R. HOLLOWAY, II President

Having been names 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 ass 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/Incorporator