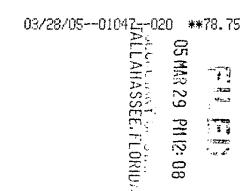
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(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bus	siness Entity Name)	
(Doc	cument Number)	
Certified Copies	Certificates of Status	
Special Instructions to F	Filing Officer:	
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	WOS1571	





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3-29.55

TRANSMITTAL LETTER

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

SUBJECT: PARK	S & ASSOCIATES, INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUSTING</u> E	UDESUBIX)
	•		
Enclosed are an ori	ginal and one (1) copy of the artic	cles of incorporation and	a check for:
[] •=• ••	The page and	- X	
\$70.00	\$78.75	A \$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
			Status
		ADDITIONAL CO	PY REQUIRED
EDOM: J	OHN ANTHONY PARKS		
rkowi.	Name	(Printed or typed)	· · · · · · · · · · · · · · · · · · ·
		V • • • • • • • • • • • • • • • • • • •	
	800 OCALA ROAD STE 300-112		
		Address	
	TALLAHASSEE, FL 32304		
		State & Zip	
	850-528-8592 OR 850-528-3506		
	Daytime To	elephone number	

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood • Secretary of State

March 28, 2005

JOHN A PARKS

SUBJECT: PARKS & ASSOCIATES, INC.

Ref. Number: W05000015714

NS 29 1341: 58

We have received your document for PARKS & ASSOCIATES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6053.

Judy Sadler Tim Burch Corporate Section Administrator Public Assistance

Letter Number: 105A00020908

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6053 and press 4. Your call will be answered in the order it is received.

Judy Sadler VAL SECTION

Letter number: 105A00020908

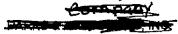
Public Assistance

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:



J. Parks & AssociatES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

800 OCALA ROAD STE 300-112 TALLAHASSEE, FL 32304

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: INDEPENDENT REPRESENTATIVES OF PREPAID LEGAL SERVICES, INC.

ARTICLE IV SHARES

The number of shares of stock is: 1



ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JOHN A. PARKS - PRESIDENT CRYSTAL S. PARKS V. P. OWNERS

800 OCALA ROAD STE 300-112, TALLAHASSEE, FL 32304

ARTICLE VI REGISTERED AGENT

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

CRYSTAL S. PARKS

800 OCALA ROAD STE 300-112, TALLAHASSEE, FL 32304

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

CRYSTAL S. PARKS

OWNERS

800 OCALA ROAD STE 300-112, TALLAHASSEE, FL 32304

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

Signature/Incorporator

3 28 04

Date

Date