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05 JUN 21 AM 7: 34

M65-28870

TRANSMITTAL LETTER

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

SUBJECT:	ECT: St. Johns Investment Group, Incorporate			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	rinal and one (1) copy of the art	ticles of incorporation and	a check for:	
□ \$70.00	\$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO		
FROM:	Joanna V. smith			
	Name (Printed or typed)			
	317 Ella Avenue			
		Address		
-	Inverness, FL 34450			
	City, State & Zip			
	352-220-2785			
	Daytime*	Lelephone number		

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



Glenda E. Hood Secretary of State

June 10, 2005

JOANNA V. SMITH 317 ELLA AVENUE INVERNESS, FL 34450

SUBJECT: ST. JOHNS INVESTMENT GROUP, INCORPORATED

Ref. Number: W05000028870

We have received your document for ST. JOHNS INVESTMENT GROUP, INCORPORATED 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) 245-6972.

Doris Brown Document Specialist New Filings Section

Letter Number: 205A00040788

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

SECRETARY OF STATE DIVISION OF STATE

ARTICLE I NAME

The name of the corporation shall be:

The St. Johns Group, Inc.

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

P.O. Box 834 Inverness, Florida 34451

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Auto and truck sales
Auto and truck financing

Real Estate Investment

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Joanna V. Smith, PVS P.O. Box 834 Inverness, FL 34451

ARTICLE VI REGISTERED AGENT

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

Joanna V. Smith 317 Ella Avenue Inverness, FL 34450

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joanna V. Smith P.O. Box 834 Inverness, FL 34451

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

Date