# P05000115260

(Requestor's Name)	
(Address)	_
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(_aomoes _may , ams)	
	_
(Document Number)	
Certified Copies Certificates of Status	_
Control Control	٦
Special Instructions to Filing Officer:	I
	١
	-
	l
	ı
	╝

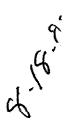




800058333578

118/18/195--01014--001 \*\*70.00

FILED 2005 AUG 1 & P 3: 35 SECRETARY OF STATE



FROM:

Thirza Duensing

272 Canal Blvd

Ponte Vedra Beach FL 32082

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

OF INCORPOD A TOTAL

## 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:

Thirza Duensing, Inc

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4141 Southpoint Drive East, Suite C

Jacksonville, FL 32216

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful business purpose including but not limited to business consulting, authorized within the state of Florida

#### ARTICLE IV SHARES

The number of shares of stock is:

1,000 shares

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Thirza Duensing, Director and President

272 Canal Blvd

Ponte Vedra Beach FL 32082

# ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Thirza Duensing
272 Canal Blvd
Ponte Vedra Beach, FL 32082
ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Thirza Duensing
272 Canal Blvd
Ponte Vedra Beach, FL 32082
**************************************
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   Date
Signature/Incorporator Date