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# TRANSMITTAL LETTER

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

SUBJECT:	- MENT, INC.		
Enclosed are an ori	(PROPOSED CORPORAT		
□ \$70.00 Filing Fee	\$1 \$78.75  Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee. Certified Copy & Certificate of Status
FROM:	ROBBIE JENNINGS		
	281 MUBERRY STREET	rinted or typed) Idress	
	JACKSONVILLE, FLORIDA City, St	32208 tate & Zip	
	(904) 766-1536  Daytime Tel	ephone number	<del></del>

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

# ARTICLES OF INCORPORATION

65 (C)V 21 CT 4: 23
MILAYASSEE, FLORIDA

OF

C - MENT, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE | NAME

The name of the corporation shall be:

C - MENT, INC.

#### ARTICLE II PRINCIPAL OFFICE

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

281 MUBERRY STREET
JACKSONVILLE, FLORIDA 32208

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 SHARES @ \$1.00 PER SHARE

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

BERTHA LEE HOWZE
4519 BRENTWOOD AVENUE
JACKSONVILLE, FLORIDA 32206

# ARTICLE V INCORPORATOR(S)

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

ROBBIE JENNINGS 281 MUBERRY STREET JACKSONVILLE, FLORIDA 32208

The undersigned	ncorporator(s) ha	s(nave) executed the	ese Articles of Incorporation
14	day ofNOVEMBER,		
	Rolbie	Jenning Signature	1
		Signature	
		Signature	· · · · · · · · · · · · · · · · · · ·

Articles of Incorporation Filing Fee - \$35

## ARTICLE VI INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ROBBIE JENNINGS 281 MUBERRY STREET JACKSONVILLE, FL 32208 PRESIDENT

# 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: <u>C - MENT, INC</u>			
	······································			
2. The r	name and address of the registered agent and office is:			
		======================================	ξ. Τ	
	BERTHA LEE HOWZE	5.		
	(Name)	85	17.3	
	4519 BRENTWOOD AVENUE		<u></u>	Ċ
	(P.O. Box not acceptable)	FLORIDA	년 123	
	JACKSONVILLE, FLORIDA 32206	D.	177. 170	
	(City/State/Zip)			

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.

utha her Hruze 11/11/05
(Signature)