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COVER LETTER

Mease Ratio!

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

SUBJECT: Super Island Subdivision Inc.				
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM: Genelie Bailey Name (Printed or typed) P.O. Boy 13671 Address				
	TAMPA City,	Honda State & Zip	33681	

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	**************************************
ARTICLE I NAME	FILED
	- 06 MAR 22 PM 2: 43
The name of the corporation shall be: Super Island Subdivision, Inc.	SECRETARY OF STATE
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 7001 Internal Polyd - Po Box 13671	, and the second
TAMPA Horida, 33681 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
TRADE STOCKS	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Cenelie Bailey, Musident, Secretar	my, Treasure/
Doe Balley, Vice President	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered ag	gent is:
Genelie Bailey 1001 Interpay Blud, 409-2	
TAMPA, Florida 33616	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Genelie Bailey 1001 Interbay Blud - 409-2	
Box 13671 TAMPA, Florida 3368	<i>_</i> ****************
Having been named as registered agent to accept service of process for the above stated corporation certificate, I am familiar with and accept the appointment as registered agent and agree to act in this c	
Genelie Bailey 3	3/21/08
Signature/Registered Agent	Date
Signature/Registered Agent grant Genetic Baitan 3/	131/06
Signature/Incorporator	Date