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September 5, 2006

#### CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

	James Steven	s Inc.	
	Filing Evidence  ☑ Plain/Confirmation Copy	- · · · .	Type of Document Certificate of Status
	□ Certified Copy	۵	Certificate of Good Standing
			Articles Only
	Retrieval Request  Photocopy  Certified Copy		All Charter Documents to Include Articles & Amendments Fictitious Name Certificate Other
	NEW FILINGS	AMENDMENTS	
X	Profit	Amendment	
	Non Profit	Resignation of RA O	fficer/Director
	Limited Liability	Change of Registered	Agent
	Domestication	Dissolution/Withdray	val
	Other	Merger	
	OTHER FILINGS	REGISTRATION/QU	UALIFICATION
	Annual Reports	Foreign	
	Fictitious Name	Limited Liability	
	Name Reservation	Reinstatement	
	Reinstatement	Trademark	
		Other	

## FILED

### ARTICLES OF INCORPORATION

	JA	MES STEVE	MS INC	2006 SEP	-5 AM 10: 46
	,	(name of o	corporation)	SECRETA TALLADA	KY UF STATE
The undersign corporation	gned subscriber(s) to these Ar under the laws of the State	ticles of Incorport of Florida.	ttion, natural perso	n(s) competent to e	ontract, hereby form a
	· A	RTICLE I - CO	RPORATE NAME		
The name	of the corporation is:	MES STEVEN	S INC		
TL:	and a shall make a sure D		- DURATION		
inis corpoi	ation shall exist perpetually		according to Flori	da law.	
The corpora	ation is organized for the pur	pose of engaging		business permitted	under the laws of the
United Stat	es and the State of Florida.		•	•	
4			CAPITAL STOCK		_
-	ntion is authorized to issue		<u> </u>	,	
Dollar(s)	<u>1.00</u> par	value Common	Stock, which shall	be designated "C	ommon Shares."
	ARTICLE V -	INITIAL REGI	STERED OFFICE	AND AGENT	•
The princip	oal office, if known, or the r	nailing adress of	the corporation is	<u> </u>	
NAME	James Stevens	· 			•
ADDRESS	12364 Brookside	St			
CITY	Snrina Hill		FLORIDA		ZIF 34609
The name	and street address of the In	itial Registered	Agent of this Corp	poration is:	<del></del>
NAME	James Stevens				•
ADDRESS	17364 Brookside	S.t	*		
CTTY	Spring Hill		FLORIDA	· ·	
	APTICI	E VI - INITIAL	BOARD OF DIR		ZIP 346.09
increased	ration shall have <u>one</u> or diminished from time to t of the initial director(s) of t	ime by the By-L	_) directors initiall	y. The number of	directors may be either (1). The names an
NAME	James Stevens				
ADDRESS	12364 Brookside	. St		, 	<del></del>
СПҮ	Spring Hill		STATE	Florida	zir 3460 <b>q</b>
NAME					
ADDRESS		·			
CTTY		:	STATE	<del></del>	ZIP
NAME					
ADDRESS				·	
_					

#### ARTICLE VII - INCORPORATORS

ME	James Stevens				
DRESS	12364 Brooksid	e St		<del>' '                                  </del>	
ΙΥ	Spring Hill		STATE	Florida	ZIP 34609
MB		·	,		
DDRESS				rfea	
TY			STATE		ZIP
ME			•	•	
DDRESS					
TY			STATE		ZIP
					(S
STATE OF	FLORIDA  Pasco	) ) \$8		*:	
COUNTY (					
before me,	a Notary Public authorized to	take acknowledg	ements in the Sta	te and County set	forth above, person
before me,	a Notary Public authorized to	take acknowledg	ements in the Stat	te and County set	forth above, person
before me, appeared	a Notary Public authorized to me and known to be the pe				
before me, sappeared  DL a		erson(s) who ex	ecuted the forego	ing Articles of I	
DL known to racknowledge	me and known to be the pe	executed the	ecuted the forego	ing Articles of In	acorporation, and
DL aknown to racknowledge	me and known to be the pe	executed the	ecuted the forego	ing Articles of Incorporation.	acorporation, and

## CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

#### CERTIFICATE OF REGISTERED AGENT

OF

JAMES STEVENS INC

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

<b>a</b> t	12364 BROOKSIDE ST
	SPRING HILL FLORIDA 34609
has named	TAMES STEVENS
located at	the aforesaid address, as its Registered Agent to accept service of process

#### **ACKNOWLEDGEMENT**

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)