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Florida Department of State
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TALLAHASSEE, FLORIDA

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To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : A 1 A CORPORATE SERVICES, INC.
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FLORIDA PROFIT/NON PROFIT CORPORATION

Kim Perry, Inc.

Certificate of Status	0
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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 :
Kim Perry, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business is :

851 NW 24TH CT #3106
OCALA FL 34475

The mailing address is :

P.O. BOX 1839
OCALA FL 34478

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:
1,500 COMMON SHARES PAR VALUE \$.01

ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers is/are:

President:

KIM PERRY
P.O. BOX 1839
OCALA FL 34478

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

KIM PERRY
851 NW 24TH CT #3106
OCALA FL 34475

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TALLAHASSEE, FLORIDA

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ARTICLE VII INCORPORATOR


The name and Florida street address of the Incorporator is:

KIM PERRY
P.O. BOX 1839
OCALA FL 34478

Having been named as registered agent to accept service of process for the above 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.


KIM PERRY / Registered Agent

04/30/07
Date


KIM PERRY / Incorporator

04/30/07
Date

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