

P080000001916

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

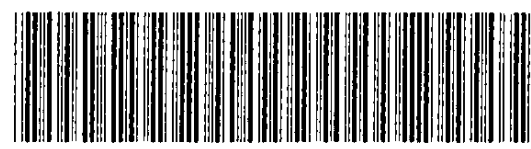
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_, Certificates of Status \_\_\_\_\_

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
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JP 1/8/08

**COVER LETTER**

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DIVISION OF CORPORATIONS

08 JAN -8 AM 11:38

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

SUBJECT: Salma Group ~~DEVISION~~  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: WARREN FRIESON  
Name (Printed or typed)

2197 Klinki CT  
Address

Middleburg FL 32068  
City, State & Zip

904-327-9693  
Daytime Telephone number

**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)

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DIVISION OF CORPORATIONS

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**ARTICLE I NAME**

The name of the corporation shall be:  
SALMA GROUP DIVISION INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:  
WARREN FRIESON & DEVON FRIESON  
2197 Khaki CT  
Middleburg FL 32068

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
COMMERCIAL PROPERTY MANAGEMENT

**ARTICLE IV SHARES**

The number of shares of stock is:  
100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):  
WARREN FRIESON - CEO  
DEVON FRIESON - PRESIDENT  
2197 Khaki CT  
Middleburg FL 32068

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
WARREN FRIESON  
DEVON FRIESON  
2197 Khaki CT  
Middleburg FL 32068

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
WARREN FRIESON  
DEVON FRIESON  
2197 Khaki CT  
Middleburg FL 32068

\*\*\*\*\*  
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

Warren Frieson  
Signature/Registered Agent

1/08/2007  
Date

Warren Frieson  
Signature/Incorporator

1/08/2007  
Date