

2-5-26

TRANSMITTAL LETTER

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

SUBJECT: JOHN J LAMB, INC.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00	\$78.75	\$122.50	\$131.25
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee Certified Copy & Certificate

FROM: JOHN J LAMB, INC
Name (printed or typed)
5408 NW 9TH LANE
Address
GAINESVILLE, FL. 32605
City, State & Zip
(352) 372-6587
Daytime Telephone Number

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

ARTICLES OF INCORPORATION

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 I NAME

The name of the corporation shall be:

JOHN J LAMB, INC.

FILED
2008 FEB - 4 P 3:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

5408 NW 9TH LANE
GAINESVILLE, FL. 32605

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 SHARES PAR VALUE \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOHN J LAMB
4300 NW 23RD AVE. SUITE 202
GAINESVILLE, FL. 32606

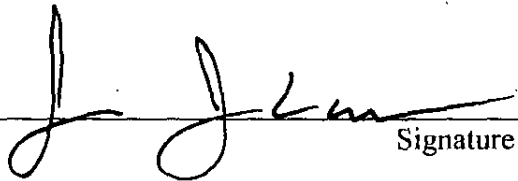
ARTICLE V INCORPORATOR(S)

The name and street addresses of the incorporator to these Articles of Incorporation are:

JOHN J LAMB
5408 NW 9TH LANE
GAINESVILLE, FL. 32605

The undersigned incorporator has executed these Articles of Incorporation this

_____ 15 _____ day of January , 2008.


Signature

**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: **JOHN J LAMB, INC.**

2. The name and address of the registered agent and office is:

JOHN J LAMB
(Name)

4300 NW 23RD AVE SUITE 202
(P.O. Box not acceptable)

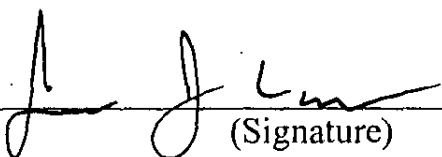
GAINESVILLE, FL. 32606
(City/State/Zip)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 FEB -4 P 3:46

FILED

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.


(Signature)

(Date) _____