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(Requestor's Name)			
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(Address)			
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. (1	Business Entity Name)			
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ECRETARY OF STATE

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COVER LETTER

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

SUBJECT: JOSEF	PH WINSTEAD, INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the artic	eles 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	& Certificate of Status
FROM: JOSEPH P. WINSTEAD Name (Printed or typed)			
	833 60TH AVE. NE	Address	
	ST PETERSBURG, FL 33703 City,	State & Zip	
	(727) 251-2285 Daytime T	elephone 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)

ARTICLE I NAME

The name of the corporation shall be:

JOSEPH WINSTEAD, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

833 60TH AVE. NE. ST PETERSBURG, FL 33703

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LAWFUL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is: 1,000

INITIAL OFFICERS AND/OR DIRECTORS ARTICLE V

List name(s), address(es) and specific title(s): JOSEPH P. WINSTEAD 833 60TH AVE. NE.

ST PETERSBURG, FL 33703

PRESIDENT, SECRETARY, TREASURER

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: JOSEPH P. WINSTEAD

833 60TH AVE. NE.

ST PETERSBURG, FL 33703

INCORPORATOR ARTICLE VII

The name and address of the Incorporator is:

JOSEPH P. WINSTEAD 833 60TH AVE. NE.

ST PETERSBURG, FL 33703

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

Signature/Registered Agent

Signature/Incorporator