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DEPARCACHE OF STATE
OLVISION OF CORPORATIONS
TALL ANASSEF, FLORIDA



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COVER LETTER

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

SUBJECT: CARZIS Le TRC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)		
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:	
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED	
	ABBITTONAL COLL REQUIRED	
FROM: Mrs. Durothy C. Hughes Name (Printed or typed) PD. BDY 189		
Grétia Flurido 37332		
Oity, State & Zip (850) 8576 - 9593 Daytime Telephone number		
E-mail address: (to be used for future annual report notification)		

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) The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE Principal street address rliste In ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: ARTICLE IV SHARES The number of shares of stock is: INITIAL OFFICERS AND/OR DIRECTORS Wrothy C. Ituches Name and Title: Address: Address: Name and Title: Name and Title: Address: Address: Name and Title: Name and Title: Address: Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: ARTICLE VII INCORPORATOR The name and address of the incorporator is: Name: Address: Gretna 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 us registered agent and agree to act in this capacity Required Signature/Registered Agent

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.