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COVER LETTER

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

SUBJECT:	NTHONY HONT (PROPOSED CORPORA	GNOUP.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d 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 REQUIR	
FROM:	ANTHONY HO	e (Printed or typed)	
	9216 Leith 0	Address	
	JACI (SONU: 11e, Fl City,	32208 State & Zip	
	(904) 424 3460 Daytime T	elephone number	
	_	All. Com d for future annual report	notification)

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

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NA The name of the corpor	ME ration shall be: Authory Ho	ent Group Inc.	
ARTICLE II PR 9216 L JACKSBRUNI	Principal street address	Mailing address, if different is: P.O. BOX 55/54/3 TACKSONVIlle, F1 37	255
ARTICLE III PUT The purpose for which	RPOSE the corporation is organized is:	AWD All LAW-ful Busines	 1
The number of shares o	TARES of stock is: / とう	SSA .	13 APR - PH
Name and Tit Address	1e: Elouise Hunt (P) 92/6 Leith Dr. JACKSONVIlle, F137208		
Name and Titl Address	e: ANThony Hunt (VA) 9216 Leith On JACKSONVILLE,F)	_ Name and Title: Address:	
Name and Title Address	e:	Name and Title:Address:	

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(conti.)

Name and	d Title:	Name and Title:	
Address		Address:	
			
ARTICLE VI	REGISTERED AGENT		
The name and Flo	orida street address (P.O. Box NOT acceptable) of	f the registered agent is:	
Name:	ANTHONY HUNT	-	
Address:	FUTHORY HUNT 9216 Leith DR	<u>.</u>	
	JACKSONVILLE FI 32208	- A	န္က ដ
ARTICLE VII	INCORPORATOR	7	APR -
The name and ad	dress of the Incorporator is:	S.	= -
Name:	FILL Leith On. JACKSONVILLE, FI 32208	.— بس. برن	9 3 [
Address:	9216 Leith On.		5: 01
	JACKgonville, FI 32208	- -	
	ned as registered agent to accept service of process in familiar with and accept the appointment as reg		designated in
		4/1/1	13
2	Required Signature/Registered Agent	Date	e
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon		ubmitted in a
			13
7(Required Signature/Incorporator	Da	ite