Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

SSCRETARY OF STATE TALLAHASSEE, FL

ARTICLE I NAME: The name of the corporation is: ARTICLE II PRINCIPAL OFFICE: The principal street address and mailing address is: 100 ARTICLE III SHARES: The number of shares of stock is: INITIAL DIRECTORS AND/OR OFFICE IS: ARTICLE V INITIAL REGISTERED AGENT AND STREET ALDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Required Signatures:

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

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 profided for in s.817.155, F.S.

Incorporator

SECRETARY OF STATE