TRANSMITTAL LETTER

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

*:h010(0000 1 41 \$ 850007*90 -003/23/95 --01027 -- 015 ++++191.25 --+++131.25

of Tallahasses PEPLE PLEBZERS INC.
(Proposed corporate name - must include suffix) SUBJECT: _

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

for:

\$70.00

JOHN F. HARKNESS IR
Name (printed or typed) FROM:

921 LOTHIAN DR Address

NANCY HENDRICKS MAR 2 3 1995

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

FILED

ARTICLES OF INCORPORATION 95 HAR 23 PH 1: 32

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:

SF TALLAHASSEC-

PEGPLE PLEEZERS, INC.

ARTICLE II PRINCIPAL OFFICE

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

921 LOTHIAN OR (MAILING) 1700-3

HALSTEAD BLUD. Tallahasser, 71. 32312

Tallahasser, H. ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

200

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOHN F. HARKNESS IN 921 KOTHIAN DR. Tallahassee, H. 32312

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation Is(are):

JURE A. HARKNESS

921 NOTHIAN DR

TUllahussur, H. 22312

JOHN F. HARKNESS

921 NOTHIAN DR.

Tallahussur, H. 32312

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	What	Signature	
1	0000	Signature	
	<u> </u>	Signature	

Signature

Articles of Incorporation Filing Fee - \$35

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.

The name of the corporation is:_	יינו נסודו לו	שבו בשונו נמ	OF Tollshers
The name of the corporation is;_	7.66.714	MEGZGE	<u>14</u> /// C.
_			
The name and address of the reg	istered agent and office	e is:	
	-	1	
JOHN 1	HARKNESS	Te Ess	22
	(Nama)		字 1 35 N R 2
921	LOTHIAN DI	R	23
IP O	Box not acceptable)		- <u> </u>
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	City/State/Zip/		1: 32

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) 3-1-95- (Date)