

P45000027748

TRANSMITTAL LETTER

FILED
95 APR -3 AM 11:30
TALLAHASSEE, FLORIDA

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

SUBJECT: Northeast Enterprises Inc.
(proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and our check
for \$ 70.00

900001447393
-04/04/95--01100--015
*****70.00 *****70.00

FROM:

Northeast Enterprises Inc.
Name (printed or typed)
P.O. Box 317
Address
Arundel FL 34679
City, State, & Zip
(913) 862-7443
Telephone Number

James Norflut GAVE

AUTHORIZATION BY PHONE TO

CORRECT

R/A address

DATE

4/2/95

DOC EXAM

John Brown

Note: Please provide the original and one copy of the Articles.

D. BROWN APR - 7 1995

ARTICLES OF INCORPORATION

OF

Norfleet Enterprises Inc.

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.

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ARTICLE I NAME

The name of the corporation shall be:

Norfleet Enterprises Inc.

ARTICLE II PRINCIPAL OFFICE

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

*18819 Tebert Drive
Aripeka, Fl. 34679*

ARTICLE III CAPITAL STOCK

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

James H Norfleet

St. Address:

18819 Tebert Drive

P.O. Box 317

Aripeka, Fl. 34679

Aripeka, Fl. 34679

Mailing address

ARTICLE V INCORPORATOR(S)

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

James H Norfleet
P.O. Box 317
Aripuka, Fl. 34679

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

29th day of March, 19 95.

James H. Norfleet
Signature

Signature

Signature
Personally Known



"OFFICIAL SEAL"
Sam Liss
My Commission Expires 1/8/98
Commission #CC 174317

Samuel Liss

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 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.

1. The name of the corporation is: NorFleet Enterprises Inc.

2. The name and address of the registered agent and office is:

James H. NorFleet
(NAME)

18919 Tebert Drive
(P.O. BOX NOT ACCEPTABLE)

Aripuka, FL 34679
(CITY/STATE/ZIP)

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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.



"OFFICIAL SEAL"
Sam Liss
My Commission Expires 1/1
Commission #CC 17431

Samuel Liss

SIGNATURE

James H. NorFleet

DATE

3/29/95

Personally Known