CAPITAL CONNECTION INC. 500028164

(Inginia St., Suite 1, Tallahassee, FL. 12301, (904)224 8870

(Ashluss, Pine Office this 10349, Tallahasse, El. 1330)

417 E. Virginia Sr., Suite 1, Tallahassee, Fl. 12301, (904)224-8870. Mailing Address: Post Office Box 10349, Tallahassee, FL 32302. TOLT FREE No. 1 800-342-8062. FAX (904)-222-1222.

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THANK YOU from Your Capital Connection

ARTICLES OF INCORPORATION

95 APR 10 PH 1:51

OF

SECKETALY OF STATE TALLAHASSEL FLORIDA

FOUR SEASONS GALLERY, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is FOUR SEASONS GALLERY, INC.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 125 North Waukesha Street, Bonifay, FL 32425.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is six hundred (600) shares having a par value of one dollar (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Roy A. Lake, Esquire, 112 West Virginia Avenue, Bonifay, FL 32425.

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of each member of the initial Board of Directors of the corporation is:

Sandy Spear Route 4 Box 124, Bonifay, FL 32425 Lynette Hornsby Route 4 Box 125-B, Bonifay, FL 32425 Betty Spear Route 4 Box 125, Bonifay, FL 32425

The undersigned has executed these Articles of Incorporation this 10th day of April, 1995.

Capital Connection, Inc.

Barbara Neeley - President

Incorporator

CRRTIFICATE OF PRSIGNATION REGISTRED OFFICE

95 APR 10 PH 1:51

Pursuant to the provisions of section 607.0501, Florida
Statutes, the mentioned 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	DAMO	of	the	corporation	101_FOUR	SEASONS	CALLERY	INC.
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2.	The	name	and	street	addrass	o f	the s	egistered	agent	and
offic	a i	t RC	ΟΥ Λ.	LAKE,	ESQUIRE	112	WEST	VIRGINIA	AVENUE	

BONIFAY, FLORIDA 32425

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,

1200