.995000031875

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314				
SUBJECT: S'I	AINED GLASS	IMAGES, INC.		
(Pro	oposed corporate n	ama - must includa suff	ix)	3.0
Enclosed is an original	and one (1) co	py of the articles of	Incorporation	and a check
for:	X \$78.75	\$122.50	[]\$131.25	
Filing Fac	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy	
	a Ceronicata	Additional Copy	& Certificate	
		Additional Copy	Nequired	
FROM:		A S. CASHION printed or typed)		ÇMOO 1 4 (James)
	175 WEST CHAPMAN ROAD			4/18/35~~01013~~0;?
	Address			****78.75 *****78.75
	OVIEDO, FL 32707			
	City, State & Zip			
	(407) 365-7667			
	Daytime Telephone number			,
				5

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

ARTICLES OF INCORPORATION

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:

STAINED GLASS IMAGES, INC.

ARTICLE II PRINCIPAL OFFICE

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

253 LIVE OAKS BOULEVARD

CASSELBERRY, FL 32707

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LARRY W. CASHION, JR.

253 LIVE OAKS BOULEVARD

CASSELBERRY, FL 32707

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

BARBARA S. CASHION

175 WEST CHAPMAN ROAD

OVIEDO, FL 32765

13 day of	APRIL	, 1995
	Ba	Sona Stashan
<u></u>	<u></u>	Signature
		Signature
		Signature
		Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: STAINED GLASS IMAGES, IMC	•	
2.	The name and address of the registered agent and office is:	25 25 25 25 25 25 25 25 25 25 25 25 25 2	
	LARRY W. CASHION, JR. (NAME)		
	253 LIVE OAKS BOULEVARD (P.O. Box or Mail Drop Box NOT ACCEPTABLE)	1971 A 1777 A 1774 A	
	CASSELBERRY, FL 32707 (CITY/STATE/ZIP)		

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.

Zavvy W. (aufa-: 4/13/95 (DATE)