

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

SUBJECT:,		MCCCCA CONCCLANT	2 111C				
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	il and one (1) co	py of the articles of incorpora	tion and a check				
for:	√						
\$70.00	\$78.75	\$122.50 \$131.					
Filing Fee	Filing Fee & Certificate	Filing Fee Filing Fe & Certified Copy Certified C	Copy				
		& Certific	ate				
		Additional Copy Required	'				
FROM:	CARY	A MATICX	- 8/8/1				
Name (printed or typed)							
	414 R 11	POCERCED PLACE					
	<u> </u>	-(]					
		Address					
	CRNOUD BEACH, FL SUITY						
	(904)	12 .146					
		Telephone number					
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			*****78.75 *****78.75				

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: Grandon's ACCHOOLEGE TO CONSOL'S ASSISTANCE TO CONSOL'S ASSISTANCE TO CONSOLED ASSISTANCE TO CONSOL

ARTICLE II PRINCIPAL OFFICE

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

MA RIDGERICED PEACE SENEMEND BEACH, TE SOUTH

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GARY A MATTOX

94 RIDGETTEED PLACE
CEMBERO BEACH, EC 30174

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):

GARY A. MATTOX, BY RIDGEFIELD PLACE CRMOOD REACH, TE SAITY LARGE I MATTOX, BY RIDGEFIELD PLACE CRMOOD BEACH, TE SAITY

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

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:	MINCHIC	Man Car	i <u>(3)</u> (3) (1)	17 1 1 1 h	, tre
						;
2.	The name and address of the registe	ered agent and	office is:		; -	1
	<u> </u>	(NAME)			- J
	(P.O. Box	or Mail Drop Box	NOT ACCEPTABLE)			
	- PMCKI	O BEACH (CITY/STATE	(()))			

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) (Date)