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

6000001\$574\$6 -08/10/95--01014--093 ****131.25 ****131.25

SUBJECT: River City Distributing, Inc. (Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: x \$131.25 \$122.50 \$78.75 \$70.CO Filing Fee, Filing Fue Filing Fee Carafied Copy Filing Fee & Carofied Copy & Certificate & Caroficate Additional Copy Required PH 12: Clyde H. Fellows FROM: Name (printed or typed) P. O. Box 516, 1474 SR 69 S. Address Grand Ridge, FL 32442 City, State & Zip 904 592-6931 Daytime Telephone number

9/10

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corpora ion under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

> NAME ARTICLEI

The name of the corporation shall be:

River City Distributing, Inc.

PRINCIPAL OFFICE ARTICLE II

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

P. O. Box 516 1474 SR 69 S Grand Ridge, FL 32442

SHARES ARTICLE III

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

1000 Common

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and address of the initial registered agent is:

Clyde H. Fellows P. O. Box 516 1474 State Road 69 South Grand Ridge, FL 32442

INCORPORATOR(S) ARTICLE V

See instructions for officers/directors

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

Clyde H. Fallows 1474 SR 69 S. 32442 Grand Ridgo, FL.

Lynda H. Follows 1474 SR 69 S. Grand Ridgo, FL 32442

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 13th day of ____ Secretary/Treasurer

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

Signature

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: River City Distributing, Inc.			
2.	The name and address of the registered agent and office is:	TALLAN	95 AUG	-11
	Clyde H. Fellows (Name)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10 PH	
	1474 State Road 69 South (P.O. Box or Mail Drop Box NOT ACCEPTABLE)	A	PH 12: 40	9 ISTAR
	Grand Ridge, FL 32442 (CTTY/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.

Olydi Haellich July 13, 1995
(SIGNATURE) (DATE)