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TRANSMITTAL LETTER

DIVISION OF CORPORATIONS

95 AUG 11, PH 1: 04

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

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

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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:

Rivertown Antique Mall, Inc.

ARTICLE II PRINCIPAL OFFICE

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

114 S. Woodland Blvd. DeLand, FL 32720

ARTICLE III

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

ten (10)

INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

> Daniel Charles McKenna 734 N. Tuxedo Ave. Deland, FL 32724

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):

Daniel C. McKenna Tracy McKenna 734 N. Tuxedo Ave. 734 N. Tuxedo Ave.

Deland, FL 32724 Deland, FL 32724

The undersigned inco	orporator(s) has(hav	e) executed these A	articles of Inco	orporation thi
day of	August	, 19 <u>95</u>	 	•
9	ry A- W	1 Konna		
	Danuel C. V	McKenn		
		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

ON SECRETARY OF STATE OF CORPORATIONS

95 AUG 11, PH 1, 04

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:	ertown Antique Mall, Inc				
2. The name and address of the registered agent and office is:					
Daniel Ca	McKenna_				
(P.O. Box or Mail Dro	P BOX NOT ACCEPTABLE)				
	FL 32724				
agent and agree to act in this capacity. I found	o accept service of process for the above stated cate, I hereby accept the appointment as registered agree to comply with the provisions of all statutes of my duties, and I am familiar with and accept the				