TRANSMITTAL LETTER RECEIVED

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

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a check

SUBJECT: PINEVIEW MHP	INC.			
(Proposed corporate name - must include suffix)				

Enclosed is an origina for:	l and one (1) co	py of the articles o	of incorporation and
\$70.00 Filing Fea	\$78.75 Filing Foo & Cortificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate  / Required
FROM: LEE W TROUPE  Name (printed or typed)			
POBOX 1765 Address			
LAKELANO FL 33802-1765  City, State & Zip			
	Daytime T	elephone number	

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.

The name of the corporation shall be: TNEVIEW MITPING

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

120 Box 1765 LAKELANO FL 33802-1765

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARTIN J. SMITH

TITLETRUST

320 W FLETCHER DVENUE, TAMPA FL 33624

## 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):

LEE W TROUPE

ROUTE 13 Bax 696

1391 Hand TREE Larve

LAKELAND FL 33801

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

30TH day of August , 19 95

Lee W Signature

Signature

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

Signature

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	of the corporation is: PINEVIEW MHP INC.	· · · · · · · · · · · · · · · · · · ·
2. The name a	and address of the registered agent and office is:	
	MARTIN J. SMITH	
	(NAME)  320 W. FLETCHER AVE  (P.O. Box of Mail Drop Box NOT ACCEPTABLE)	
	IMPA FZ 33624 (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.

(SIGNATURE)

8-30-95 (Date)