P950000009059 TRANSMITTAL LETTER

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

SUBJECT: <u>Jame</u>	o <u>s*Summers an</u> Proposed corporate	d Associates. Inc. name - must include sulfix)			
Enclosed is an origina for: \$70.00 Filing Fee	al and one (1) c 578.75 Filing Fee & Certificate	Filing Fee Filing & Certified Copy Certified	131.25 ng Fee. fied Copy erdficate	neck Str	
FROM:	Sharor Nam	lames/Leslie_Summer e (printed or typed)	(1)	9- dis	77
	3630 S	Hopkins Avenue	iri.	===	
		Address	10 M		
	Titusville, FL 32780		0	. ω	
	•	City, State & Zlp		•	
		107-268-8184	_ _		
	Daytin	ne Telephone number			

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

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ARTICLES OF INCORPORATION

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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:

James*Summers and Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3630 S. Hopkins Avenue Titusville, FL 32780

ARTICLE III SHARES

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

N/A

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Sharon James 1571 Blueberry Drive Titusville, FL 32780

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):

Sharon James 1571 Blueberry Drive Titusville, FL 32780 Leslie Summers 5465 Barna Avenue Titusville, FL 32780

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

day of Signajure 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:	James*Summers and	Associates, Inc		<u> </u>
2.	The name and address of the regist	ered agent and office is:			_
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	1571	Blueberry Drive	; i.e. (i.e.	9- dz	
	(P.O. Box	Or Mail Drop Box NOT ACCEPTABL	E)	골	1
	Titu	SVIIIe, FL 32780 (CITY/STATE/ZIP)	्रा प्रवेश स्वरा	1:38	ر _{حده} ه

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.

Moun James July 1, 1995
(SIGNATURE)