## TRANSMITTAL LETTER Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 09/22/95--01073--008 \*\*\*\*122.50 \*\*\*\*122.50

300001591753

SUBJECT: (Proposed corporate name - must include suffix)

Enclosed is an origina for:	al and one (1) co	py of the articles o	f incorporation	and a c	heck	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy  Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate	SECRE	95 SEP	71
FROM:	SNITH Name (	printed or typed)	14, JC	HASSEE, FI	P 22 PH	ILED
	6790	Address	7- Sc.	OKIDA OKIDA	1: 27	
	City,	TET Shere	J.F. 3=	700	. –	
		elephone number				

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

ARTICLES OF INCORPORATION

FILED

95 SEP 22 PM 1: 27

SECRETARY OF STATE

ALLAHASSEE

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adop'(s) the following Articles of Incorporation.

The name of the corporation shall be:	ARTICLEI	NAME HERS	(1,21)
	1 //4 (	// C /C = 1	2.12

ARTICLE II PRINCIPAL OFFICE

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

3101 34 TH ST. St. ST HETERSLONG F1 33712

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

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

SMITHY MORPHY, JR 6790 157457 Son Sh. 18102's LONG, 16 3'3705

## 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).

SMITHY MURRHY TE 6790, 15-45 5 Se. · ST. PETE, FL 33705 Chilloro H MILLS 512 45 THAVE So it PETE, FL. 33705 LERCY GOFFER
1619 GG AVE So ST PETE FC. 33712

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

Il day of Systeman , 19 95

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 OFFICF/REGISTERED AGENT, IN THE STATE OF FLORIDA

1. The name of the	corporation is:	Tinene	ERS	CIRF	<b>→</b>
	_		<del> </del>		
2. The name and	address of the registe	ered agent and office i	is:		
	<u> </u>	(NAME)	12171	1. Jr.	
	(P O Box o	Or Mail Drop Box NOT A (CITY/STATE/ZIP)	ACCEPTABLE)	SECRE TALLAI	95 S
	- 1 F-	(CITY/STATE/ZIP)	397	70-5 EF 1	FILEI EP 22 ;
agent and agree to relating to the prop	ed as registered ago place designated in t act in this capacity. er and complete perf osition as registered	ent and to accept so his certificate, I here I further agree to co formance of my dutie	ervice of pro	ocess for the a	:: Bove stated as registered
Thurky,	(SIGNATURE)		<u>/</u> - (Dat	E)	5