TRANSMITTAL LETTER 28

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 SUBJECT: Brian Mikkelson (proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and our check for \$ 122.50

FROM:

Brian Mikkelson Name (printed or typed) 5563 Pillar Ave. Address Springhill FL 34608 City, State, & Zip (352) 683-4308 Telephone Number

Note: Please provide the original and one c y of the Articles.

ARTICLES OF INCORPORATION

SECULIARISE PROSPECTOR

<u>OF</u>

Brian Mikkelson, INC.

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:

Brian Mikkelson, Inc.

ARTICLE II PRINCIPAL OFFICE

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

5563 Pillar Ave Springhill, FL 34608

ARTICLE III SHARES

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:

Brian Mikkelson

5563 Allar Ave.

Springhill, FL 34608

ARTICLE V INCORPORATOR(S)

	et address(es) of the Inc	corporator(s) to these Articles of Incorpora	a
tion is(are):	Brian 1	Mikkelson	
	5563 1	Pillar Aue.	
	springl	nill, FL. 34608	

Signature

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Fiorida 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: Brian Mikkelson	V IAC.
2.	The name and address of the registered agent and office is:	•
	Brian Mikhelson	
	(NAME)	96 1AL
	5563 Pillar Aue.	
	(P.O. BOX <u>NOT</u> ACCEPTABLE)	SSEED PH
	Springhill, FL 34608 (CITY/STATE/ZIP)	H 6: 50
	(CITT/STATE/ZIP)	Ömi 2

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 Buch Milkel			
DATE	1-2-96		