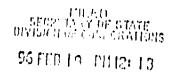
## P96000016031

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

	roposed corporate	-U2/ 中州	0001718885 /20/9601050008 ***78.75 *****78.75
Enclosed is an original for :  [] \$70.00  Filing Fee	l and one (1) co  \$78.75 Filing Fee & Certificate	\$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy & Certificate Additional Copy Required	
FROM:	_	Olds (printed or typed) Fairway ave. Address	SOSTATE SOSTATE SUB: 13
	904-59	y, State & Zip  6-3260  Telephone number	

NOTE: Please provide the original and <u>one copy</u> 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.

ARTICLE I NAME

The name of the corporation shall be:

Phoenix Digesting Service, Inc.

ARTICLE II PRINCIPAL OFFICE

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

12097 Fairway ave. Brooksville, FL. 34613

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:

Kelly Olds 12097 Fairway ave. Brooksville, FL. 34613

## 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):

Kelly Olds 12017 Fairway ave. Brooksville, Fl. 34613

Betty Olds 12097 Fairway ave. Brooksville, FL. 34613

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

14 day of February, 19 96

Kelly Olds
Signature
Signature

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

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 the corporation is:	Phoenix Digesting Se	rvice, Inc
2. The name and address of the reg	istered agent and office is:	
Kelly	Old S	— (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
_	Fairway Que.	
Brooks	VILLE FL. 34613 (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.

Kelly Olds Feb. 14, 1996
(SIGNATURE) (DATE)