P960000 18091 TRANSMITTAL LETTER

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

SUBJECT: ____

SEES 26 M S. OS PALLANISSEE, FLORIDA

	Proposed corporate	name - must înclude su	-02. 20	00001729892 /26/9601054012 ***78.75 *****78.75
Enclosed is an origination:				and a check
Filing Fee		Filing Fee & Cerdified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate y Required	
FROM:	Garrison			
	Name (printed or typed)		
a letter	61 Fairmo	ount St.		
and box		Address		
e ox fee bother	Burlingto	on, VT 05401		
9. •	City	, State & Zip	· · · · · ·	
	(813) 876 Daytime 1	-7718 Felephone number		·

State Funds, Inc.

F. CHESSER FEB 2 8 1996

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.

ARTICLE I NAME

The name of the corporation shall be:

State Funds, Inc.

96 FEB 26 AH 8: 05
SECRETARY OF STATE
TALLAHASSEE, FLORID

ARTICLE II PRINCIPAL OFFICE

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

61 Fairmount St. Burlington, VT 05401

ARTICLE III SHARES

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

Ten Thousand (10,000) no-par

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

Mike Urette 3239 Henderson Blvd. Tampa, FL 33609

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:	Sta	te Funds,	Inc.		
2. The name and ac	ddress of the registe	ered agent and	, /			
	MICHA 3239 (P.O. BOX	(NAME) (NAME) OF Mail Drop Box (CITY/STATE	RSON NOT ACCEPTA 33.6 (ZIP)	BLVD	96 FEB 26 AM 8: 05 SECRETARY OF STATE TALLAHASSEE, FLORIDA	

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.

Auekael 6. wette 2/5/96 (DATE)

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):

Garrison Urette 61 Fairmount St. Burlington, VT 05401

FILED 96 FEB 26 NH 8: 05

	day of	February	, 19 <u>96</u>	
	(Jarrison	- Signature	
			Signature	
		<u>.</u>	Signature	
			Signature	· · · · · · · · · · · · · · · · · · ·
E: /	Affixing an	officer title after	a signature of an incorpora	ator does not constitut