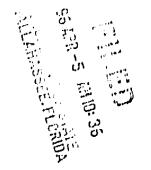
TRANSMITTAL LETTER

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



SUBJECT: Florida Land Source, Inc
(Proposed corporate name - must include suffix)

800001770848 -04/05/96--01052--009 ****131.25 ****131.25

Enclosed is an origin for : \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	X \$131.25 Filing Fee, Certified Copy & Certificate	and a check
FROM		vé M. M./ (printed or typed)	ler	4
	1170 E.	Page Da. Address		
	DE HONA	<u> </u>	<u> </u>	
	<u>(407) 5 7</u> Daytime	4-7574 Telephone number		

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 Insorporation.

ARTICLE I NAME

The name of the corporation shall be:

Florida LAND Source, Inc.

ARTICLE II PRINCIPAL OFFICE

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

704 Castlewood De. Winter Springs, Fl 32708

ARTICLE III SHARES

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

One Hundred (100)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Christine E. Miller 704 Castlewood Dr Winter Springs, Fl 32708

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):

Genevieve M. Miller 704 Castlewood Dr. Winter Springs, Fl 32708

The undersigned i	ncorporator(s) h	as(have) executed these Articles of Incorporation this
day of	April	, 19 96.
[(An add/tional artic	cle must be adde	ed if an effective date is requested.)

Henemene m. miller Signature	
Signature	
Signature	
Signature	_

Notarization is not required

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

So Tay State of the So 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: Florion Land Source, Inc.
2.	The name and address of the registered agent and office is:
	Christine E. Miller
	704 CASHEWOOD DA. (P.O. Box or Mail Drop Box NOT ACCEPTABLE)
•	Winter Springs Fl 32708 (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.

(SIGNATURE)