Department of State Division of Corporations PO Box 6327 Tallahassee, Florida, 32314

SUBJECT:

THE SHOPPING SHED, LTD.,

R96000001696

Enclosed is an original and one copy of the articles of incorporation and a check for:

\$78.75 FOR FILING FEE AND CERTIFICATE

FROM:

PO BOX 1770

INDIANTOWN, FLORIDA, 34956

(407) 597-3312

NP Same P9600000169 11294-10-706

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Taliahassee, FL 32314 Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$78.75 \$122.50 \$131.25 \$70.00 Filing Fee & Certificate Filing Fee & Certified Copy Filing Fee, Certified Copy Filing Fee Additional Copy Required FROM: Name (printed or typed) (NDIANTOWN FLM.
City, State & Zip

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

Daytime Telephone number



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 20, 1996

ALBERT HEARN PO BOX 1770 INDIANTOWN, FL 34956

SUBJECT: THE SHOPPING SHED, INC.

Ref. Number: W96000010706

We have received your document for THE SHOPPING SHED, LTD. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The use of LIMITED or LTD, is not sufficient as a corporate suffix. The name must include a word such as INCORPORATED, INC., CORPORATION, CORP., COMPANY, or CO.

Bylaws are not filed with this office. Please retain them for your records.

The articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6880.

Karen Gibson Corporate Specialist

Letter Number: 596A00025020

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:

Shopping Shed, INC.

ARTICLE II PRINCIPAL OFFICE

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

BOX 1770 INDIANTOWN FLA. 34956 SECRETARY OF STATE SECRETARY SEE, FLORIDA

ARTICLE III SHARES

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

200

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ALBERT HEARN 16262 SW PINTOST. INDIANTOWN, FL C4956

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);

Albert HENEN PIDIR.
162525WDINTO St.
INDIANTOWN FLA. 34956

Edward Culpepper IDIR.
16252 S.W. PINTO St.
INDIANTOWN FLA. 34956

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

24 day of 11/44 , 19 96.

(An additional article must be added if an effective date is requested.)

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

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 REJISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is:	Shopping Shed INC.	
2.	The name and address of the registered agent and office is:		
	16252 S.W. PINTO ST. (P.O. BOX OF Mail Drop BOX NOT ACCEPTABLE) [CITY/STATE/ZIP]		SECRETARY OF STATE SECRETARY OF STATE

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.

(Client Lister May 24, 1996 (SIGNATURE) (DATE)