form C. Framoenteral Letter to Secretary of State TRANSMITTAL LETTER Department of Slate Division of Corporations P. O. 6327 Tallahassoe, FL 32314 4444 4713. 715 . 4444 4781. 75 SUBJECT: (Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the artic!os of incorporation and a check \$70.00 \$122.50 []\$131.25 Filing Fee Filing Fee Filing Fee Filing Fee. & Certificate & Certified Copy Certified Copy & Certificate

Please return the photocopy to me with the filing date stamped on it.

Name (printed or typed)

2275 13154 Aug E. Apt. 6286

Address

Temper F1 33617

City. State & Zip

(8/3) - 971- 465 4

Daytime Telephone Number

## **Articles of Incorporation**

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Articles of Incorpor	ation 글을 물
1. The name of the corporation shall be: SMASH	of the corporation family 4
2. The principal place of business and failing address of the control of the cont	2780 E Town 2013 1012
4. The registered agent of the corporation is Winder registered street address is 22.25 /3/21 here. Apt. Plorida 33617.	Aldrey and the
5. The initial Board of Directors shall have 2 member(s) is/are as follows: Shall follows: I leave to be a follows: Shall follows: I leave to be composed or lowered the corporation but shall in no case be less than one.	Tampa 1=1 30612
6. The incorporator of this corporation is John for address is 2225 1315 fue F. Apt. 6200 70 mps 151	whose street
Dated 5/h/1/4 Incorpor	ator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 5/21/94