from the deskof Thomas Jackson

Secretary of State Division of Corporations 2409 E. Gaines St. Tallahassee, Fl 32399 J6/70

July 1, 1996

Re: ACTION JACKSON, INC.

100001882131 -07/02/96--01141--005 \*\*\*\*122.50 \*\*\*\*122.50

Madam/Sir;

Enclosed you will find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

I would sincerely appreciate your expeditious handling in the filing of this corporation.

Thank You,

Thomas Jackson

18/16

FILED AMETARY OF STATE AMASSEE FLORIDA

## ARTICLES OF INCORPORATION

, AKTICIES	OF INCORPORATION	
·. · Act	of JACKSON II	<u> </u>
The undersigned subscriber(s) to these Articles of corporation under the laws of the State of Flor	Incorporation, natural person(s) competen ida.	t to contract, hereby form a
The name of the gornoration is:	E I - CORPORATE NAME	12 St. 12
HCT1	ON JACKSON INC	
	ICLE II - DURATION	開京 基
This corporation shall exist perpetually unless di	issolved according to Florida law.	
ART	ICLE III - PURPOSE	
The corporation is organized for the purpose of e United States and the State of Florida.	ngaging in any activities or business perm	itted under the laws of the
• • • • • • • • • • • • • • • • • • • •	E IV - CAPITAL STOCK	
The corporation is authorized to issue Five	HUNDRED shares (500) of	ONE
Dollar(s) (\$_/. 00 par value C	ommon Stock, which shall be designated	d "Common Shares."
ARTICLE V - INITIAL	REGISTERED OFFICE AND AGENT	<del>r</del>
The principal office, if known, or the mailing ac	Iress of the corporation is:	
IAME THOMAS JACKSON		
ADDRESS 12551 CAUESTRIAN C	in #701	·
ony 74 Myens	FLORIDA	ZIP 33907
The name and street address of the Initial Regi	stered Agent of this Corporation is:	
NAME THOMAS JACKSON		
ADDRESS 17551 EQUESTRIAN CIR	#701	
one It My		zip 33907
	NITIAL BOARD OF DIRECTORS	
This corporation shall have ONE (increased or diminished from time to time by the addresses of the initial director(s) of the corporation	/ directors initially. The number c By-Laws, but shall never be less than	of directors may be either one (1). The names and
IAME THOMAS JACKSON		
DDRESS 12551 EQUESTRIAN CIN	2 #70/	
my 74 mj	STATE 72	zip 33907
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## ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

AMB THOMAS SACKSON	······································	·
DDIUSS 12551 -CAUESTICIAN CI	c #701	
IV It My was	STATE 7	zii 33 <i>9</i> 07
AMB		
ODRESS		
17	SIATII	ZIP
MB		
DDRESS		
TY	SPATE	249
N WITNESS WHEREOF, the undersigned subsclay of, 19 <u>96</u> .	riber(s) have executed these Articles of It	ncorporation this
	A Part of the state of the stat	(Scal)
	thumo's	<u> </u>
	/ 10 36	350 + 6 5 d 2 30 (Scal)
		(Scal)
STATE OF FLORIDA  COUNTY OF Lee  Defore me, a Notary Public authorized to take ack appeared  Thomas L. TRCKSON	nowledgements in the State and County	set forth above, personally
41011113 C: 311CESO10		
nown to me and known to be the person(s) cknowledged before me that executive.	who executed the foregoing Articles outed these Articles of Incorporation.	f Incorporation, and who
N WITNESS WHEREOF, I have hereunto affixed ay of 5014, 1996.	my hand and scal, in the State and County	y aforesaid, this
(Notary Seal)	Notar Public, State of Florida at Large)	
OFFICIAL NOTARY SEAL MARSHA L GOLOD NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC323941 MY COMMISSION EXP. OCT. 17,1997	My Commission expires:	

## CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

Action Ackson, Toc	THE THE
(name of corporation)	2 M; 10: 31 2 M; 10: 31 2 SEE, FLORIDA

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at _	1285/ EQUESTRIAN CIR #2701				
	14	Mes.	7	33907	 
		•		Sackson	
					service of process
with	in this st	atc.			•

## ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

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