## PAGODOS 8063 TRANSMITTAL LETTER

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

SUBJECT:		S.T.L. Enterprises, Inc.			2000011885752 07/09/9601007002 ****122.50 ****122.50		
	(F	roposed corporate	name - must include suff	и)	erteles QU - 400 A	*166.DU	
Enclosed is an or	riginal	and one (1) c	opy of the articles of	incorporation	and a check		
Filing Fee		\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Cerdfed Copy Additional Copy I	#131.25 Filing Fee, Cerdified Copy & Cerdificate Required			
FR	OM:	Mike Tar	nenbaum		J		
	•	Name	(printed or typed)			*** ****	
		5104 No	rth Lane				
		Orlando,	Address Fl. 32808				
		Cit 407-297	v, State & Zip -7509				
		Daytime	Telephone number				

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

## ARTICLES OF INCORPORATION

The undersigned incorporator(x), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

> ARTICLET NAME

The name of the corporation shall be:

S.T.L. Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:

> 217 Killington Court Orlando, Fl. 32835

> > ARTICLE III SHARES

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

500

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

> Paul L. Richards 217 Killington Court Orlando, Fl. 32835

## ARTICLE V INCORPORATOR(8)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Paul L. Richards, President 217 Killington Court Orlando, Fl. 32835

The unde	rsigned	d incorp	orator(s)	has(have)	executed th	ese An	icles o	f Incorp	porati	on ti
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	. •				Signature					-
	•	·			Signature					<del>-</del>
					Signature			a d		_

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

1. The name of the corporation is:	S.T.L. Enterprises, Inc.	Principal Control of the Control of
2. The name and address of the re	egistered agent and office is:	-D. J. F.
	Paul L. Richards	Ern.
	(NAME) 217 Killington Court	
<del>(P.O.</del>	Box or Mail Drop Box NOT ACCEPTABLE) Orlandc, Fl. 32835	
	(CITY/STATE/ZIP)	
agent and agree to act in this can	d agent and to accept service of process in this certificate, I hereby accept the appacity. I further agree to comply with the property accept the agree of my duties, and I am familiated agent.	oiniment as registered
The second secon	ierea ageni.	
(SIGNAT	(DATE)	1/96