196 AM AND 1613927

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 400001899214 -07/19/96--01024--019 ****131:25 ****131.25 SUBJECT: _ SKM, Incorporated (Proposed corporate name - must include suffix) Enclosed is an original and one (X) copy of the articles of incorporation and a check for: \$70.00 \$78.75 **\$122.50** xx \$131.25 Filing Fee & Certificate Filing Fee & Certified Copy Filing Fee Filing Fee, Certified Copy & Certificate Additional Copy Required FROM: Kandi R. Newkirk AH 11: 00 Name (printed or typed) 3316 Joanna Drive Address Pace, Florida 32571 City, State & Zip (904) 995-0423 Daytime Telephone number

JUI 221996 BSB

W96-15283

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



July 22, 1996

KANDI R. NEWKIRK 3316 JOANNA DRIVE PACE, FL 32571

SUBJECT: SKM, INCORPORATED Ref. Number: W96000015283

We have received your document for SKM, INCORPORATED and check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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) 487-6925.

Brenda Baker Corporate Specialist

Letter Number: 496A00035306

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:

KSM Enterprises Incorporated

ARTICLE II PRINCIPAL OFFICE

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

6911 Cedar Ridge Circle Milton, Florida 32570 S. M. S. A. HI. 100

ARTICLE III SHARES

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

1,000

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

Kandi R. Newkirk 3316 Joanna Drive Pace, Florida 32571

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):

Kandi R. Nowkirk 3316 Joanna Drivo Paco, Florida 32571

Carol A. Lee 6911 Cedar Ridge Circle 181ton, Florida 32570 Stacio R. Leo 2790 Natalio Avenue Los Vegas, Nevada 89121

Melanio R. Lee 6911 Cedar Ridge Circle Milton, Florida 32570

The undersigned	incorporator(s) has(have)	executed these	Articles of Inc	corporation this
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18 day of July , 19 96.

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

Kandi R. Ykwkirk

Signature

Carol a. Lee

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

1. The name of the corporation is:	KSM Enterprises			
	Incorporated			
2. The name and address of the registered	d agent and office is:			
Kandi R. Newk	irk (Name)			
3316 Joanna Di (P.O. Box or l	rive Mail Drop Box <u>NOT</u> acceptable)			
Pace, Florida	32571 FOR STATE/ZIP)			
corporation at the place designated in this agent and axree to act in this capacity. I	at and to accept service of process for the above states is certificate, I hereby accept the appointment as registered. I further agree to comply with the provisions of all sentes mance of my duties, and I am familiar with and accept the gent.			
Kandi R. Mentin (SIGNATURE)	(DATE) 96			

DIVISION OF CORFORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314