

TRANSMITTAL LETTER

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96 OCT 14 PM 4:09
STOCKTON STATE
TALLMONT, LINDA GORDON
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DIVISION OF CORPORATION

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

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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:

JANNEN FOOD & GAS INC

ARTICLE II PRINCIPAL OFFICE

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

JANNEN FOOD & GAS INC
Box 761 HWY 247
Branford - FL - 32008 - 0761

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TALLAHASSEE, FLORIDA

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ARTICLE III SHARES

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

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

BENJAMIN Fuller
325 John Knox Rd
Ste D 100
Tallahassee - FL - 32303

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):

President SAMER MUSLEH
4648 DELEON ST #5259
Ft. MYERS - FL 33907

V.P. MAKRAM KURDI
13971 Windrush #4
N. Fort Myers - FL 33903

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

10 day of 14, 19 96.

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

X Samer Musleh
Signature

X Makram Kurdi
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 REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: JANNEN FOOD & GAS INC
2. The name and address of the registered agent and office is:

BENJAMIN Fuller
(NAME)

325 John Knox Rd, Ste D-100
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Tallahassee - FL 32303
(CITY/STATE/ZIP)

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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.

B. Fuller
(SIGNATURE)

10/14/96
(DATE)