P96000101485

TRANSMITTAL LETTER

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

SUBJECT: Marie Knight Inc. (unique Name)

EFFECTIVE MIE

(Proposed corporate name - must include suffix)

000002020730--4 -12/65/96--01033--008 ****122.50 ****122.50

Enclo	sed is an origina	l and one (1) co	py of the articles of	incorporation a	nd a check	
for:	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required		
	FROM:	Name	Marie Knight Name (printed or typed) 234 Pecan Street Address		96 DEC 16 AM 10: SECRETARY OF STA TALLAHASSEE, FLO	
	Jacksonville, FL 32211 City, State & Zip				39 ATE RIDA	

W-25745 Ye 12.7 12.17.96

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

Daytime Telephone number



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 9, 1996

MARIE KNIGHT 234 PECAN STREET JACKSONVILLE, FL 32211

SUBJECT: MARIE KNIGHT INC. Ref. Number: W96000025745

We have received your document for MARIE KNIGHT INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date listed in Article 6 is incomplete. The date of the signing of the articles is incorrect. We cannot file the articles with a signing date in the future.

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) 487-6932.

Kimberly Rolfe Document Specialist

Letter Number: 096A00054957

ARTICLES OF INCORPORATION

effective were

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:

Marie Knight, Inc.

ARTICLE II PRINCIPAL OFFICE

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

234 Pecan Street Jacksonville, FL 32211

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 Shares (authorized to issue).

(Shares-imp. of stock)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: "You"

Marie Knight 234 Pecan Street Jacksonville, FL 32211

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):

Marie Knight
234 Pecan Street
Jacksonville, FL 32211

Article 6 affective January 1997

January 1, 1997 is the day I start my new business.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
13 day of Rec., 19 96.
(An additional article must be added if an effective date is requested.)
Mis marie Knight Signature
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.

I. The name of the corporation is:	Marie Knight, Inc.
2. The name and address of the regist	ered agent and office is:
Marie Kn	TALL SECOND
- Idarie Kir	(NAME)
234 Pecan (P.O. Box	Street Street Or Mail Drop Box NOT ACCEPTABLE)
Jacksonvill	e, FL 32211 STR. &
corporation at the place designated in agent and agree to act in this capacit	ngent and to accept service of process for the above stated in this certificate, I hereby accept the appointment as registered ty. I further agree to comply with the provisions of all statutes erformance of my duties, and I am familiar with and accept the
obligations of my position as register	ed agent.
Mrs maris Knight	(DATE)