TRANSMITTAL LETTER

Discinctive State

Division of Lorge Care

O Box 327

allahassee, FL 32314

(Proposed corporate name - must include suffix)

			801	-12/26/96010620 ****131.25 *****13						
Enclosed	is an original and	d one(1) copy of the article	s of incorporation and a	chec :						
\$70.00 Filing Fee		\$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate						
			ADDITIONAL CO	PY REQUIRED						
the Contract		Betty Koozee Luc SSSTARY OF STAIR OF ST								
Show 1/2		City, Stat S61 - 734-04 Dayriffie Telep	138 > WK-	969-A020						
4	NOTE		31/96	e articl e s						
NOTE: Please provide the original and one copy of the articles.										

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:

Betty Kouzer, INC

96 DEC 26 PH I2: 00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

8396 93rd LANE So BoyNton Beh F1 33437

ARTICLE III SHARES

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

10

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Betty Koozer 8394 93 Lave So Boynton Beh F1 33437

ARTICLE V INCORPORATOR(S)

See instructions for officers/rirectors

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

Bethy Koozer 8394 93 LANC 50 Boynton Boh Fl 33437

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

10th day of Necenther, 19 96.

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

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:	<u> </u>	الم المات	Loozer, I	Luc	···	
2.	The name and address of the regi	stered agent	and office is:	· · · · · · · · · · · · · · · · · · ·	77		
	Betty	Kuozerz	AME)		SECRETARY VLLAHASSEI	96 DEC 26	GENERAL SERVICES
	<u> </u>	93 lox or Mail Drop	LANE BOX NOT AC	Sa CEPTABLE)	RY OF S SSEE FL	3	
	Boynto	r Beh	FI STATE/ZIP)	<i>3</i> 3431	TATE ORIDA	12: 00	

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.

Livy (SIGNATURE) 19/10/96 (DATE)