CORPORATE / P9700000506
CORPORATE
ACCESS, 1116-D Thomarville Road . Mount Verson Square . Tallahassee, Florida 32303
INC. P.O. Box 37066 (32315-7066) ~ (904) 222-2666 or (800) 969-1666 . Fax (904) 222-1666
PICK UP 12197 CA
1) Khyn Hande & DOCUMENTO) and Monz, To
2) Khan (CORPORATE NAME & DOCUMENT #)
(CORPORATE NAME & DOCUMENT #)  5.000020444357 -01/03/3/01066013 ****122.50 ****122,50  (CORPORATE NAME & DOCUMENT #)
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(CORPORATE NAME & DOCUMENT #)
9.) (CORPORATE NAME & DOCUMENT #)
(CORPORATE NAME & DOCUMENT #)  SPECIAL INSTRUCTIONS

	<b>ARTICLES</b>	OF INCORE	PORATION	
		of		e e e e e e e e e e e e e e e e e e e
han	Hun	and	MENZ	Inc.
-	Kin	me of corporation	on)	
ting as the in	corporators of a co	moration under	the Florida Business Co	moration Act. adopt

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

	ARTICLE I - CORPORATE NAME				9	
The name of the corporation is:	1	Hun	und	Menz	7 1.11	T <sub>N</sub>
This corporation shall exist perpetually		ICLE II - D	URATION	S. E. F. O. S. F. F. O. S. F. O. S. F. O. S. F. O. S. F.	-3 /// 11: (	ILED

### ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

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## ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS	4217	Pilm	Forest	Prive	500+5	
						<b>N</b> :
CITY Delra	y Ben	L	FLOF	RIDA	ZIP	33445
Mailing address, i	f different					
STREET ADDRESS						4
_						
CITY			FLŌI	RIDA	ZIP	

### ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	MAKK	A.	MENZ		
ADDRESS	4217	Palm	Forest	Dr. 5.	
CITY	Delruy	Berch		FLORIDA	ZIP 33445

NAME		r(s) of the corporat	ion are as follows  MEN			<u> </u>	
ADDRESS	MARK	O I	Firest	-		S.	
CITY	<u> 421 / </u> Dal	Palm		STATE	Florid		33443
NAME	Clay	Beach	•-		•	<u> </u>	0 0 9 43
ADDRESS	Glen	·	MENZ			<u></u>	
CITY	5/18	Beach	Blud.	STATE	FI	ZIP	2744.
NAME	Delvay	BEYCH		OIAID	, ,		33443
ADDRESS							
CITY				STATE	<u> </u>	ZIP	<del></del>
NAME ADDRESS	14ARK 4217		ME NZ Forest				
CITY	Delruy	Beych		STATE	Florid	s ZIP	33445
NAME	Glen	<u>M.</u>	MENZ				
<del></del>	3/18	Lowser	Blud			<del></del>	
ADDRESS	<del></del>	0.	<u> </u>	STATE	Florid	ZIP	3344 5
	Dela	ay Bea					
ADDRESS CITY NAME	Dela	ay 1524		<u></u>			
СІТҮ	Dela	<u></u>					
CITY NAME ADDRESS CITY		tor(s) have execu		STATE		ZIF	

(Signature)

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

	····	11011	148101	1 12 10.	- troc.
	/	(name of co	rporation)		
Pursuant to Florida	Statutes Secti	ons 48.091 and	607.0501, the	following is sub	nitted:
The above corpora	tion, organized	under the laws	of the State o	f Florida with its	registered office
as indicated in the	Articles of Inco	orporation	•	_	
at 4217	Palm	Forest	Dr.	South	
De long	Beach	FI.	334	45	
has named	MARK	A. M	ENL		
located at the afore	esaid address, a	s its registered	agent to accep	t service of proce	ss within this
state.					7
					<b>1 1 1</b>
					¥m (B

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.

(Signature)

1 hun

12/31/9<sub>(Date)</sub>