TRANSMITTAL LETTER 59 Department of State Division of Compartions

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

700002066577--7 -01/23/97--01092--002 *****78.75 *****78.75

(Pr		name - must include suff		97 JAN 17 PH SECRETARY OF TALLAHASSEE FL
Enclosed is an original for: \$70.00 Filing Fee	and one (1) co ********* ********** *********** **Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	Filing Fee, Certified Copy & Certificate Required	and achecing
FROM:	Name	nt D. Balletto (printed or typed) Town Center Blv Address	d. #165	MANORNSWER
A	(40 7)	do, Florida 328 ity, State & Zip 850-5585 • Telephone number	P.A. 00	

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



FLORIDA DEPARTMENT OF STATE Sanda B. Mortham Secretary of State

January 8, 1997

VINCENT D. BALLETTO 3956 TOWN CENTER BLVD. #165 ORLANDO, FL 32837

SUBJECT: V. BALLETTO & ASSOCIATES INC. Ref. Number: W97000000418

We have received your document for V. BALLETTO & ASSOCIATES INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

Please return the enclosed check for \$78.75 or a newly issued check with your corrected document.

If you have any questions concerning the filing of your document, please call (904) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 397A00000846

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327 Tallahassee, FL 32314 SUBJECT: V. Balletto & Associates, Inc. (Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$70.00 XX \$78.75 \$122.50 \$131.25 Filing Fee & Certificate Filing Fee Filing Fee & Certified Copy Filing Fee, Certified Copy & Certificate **Additional Copy Required** FROM: Vincent D. Balletto Name (printed or typed) 3956 Town Center Blvd. # 165 Address

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

Orlando, Fl 32837 City, State & Zip

Daytime Telephone number

(407) 850-5585

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:

V. Balletto & Associates, Inc. FLORIDA

7 JAN 17 PM 1:52 ECRETARY OF STATE LLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

3669 Ocita Dr. Orlando, Fl 32837

ARTICLE III SHARES

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

100

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

Vincent D. Balletto 3669 Ocita Dr. Orlando, Fl 32837

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):

Vincent D. Balletto 3669 Ocita Dr. Orlando, Fl 32837

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: V. Balletto &	V. Balletto & Associates, Inc.			
2.	2. The name and address of the registered agent and office is:				
	Vincent D. Balletto (NAME)	TAI	9		
	3669 Ocita Dr. (P.O. Box or Mail Drop Box NOT Accer	ECRETAR LL AHASS	TAN 17		
	Orlando, Fl 32837 (CHY/STATE/ZIP)		PH 1:52		
H	Having been named as registered agent and to accept service	_			

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) //2/97