P97000007179 TRANSMITTAL LETTER

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

400002068214---6 -01/24/97--01033--002 ****131.25 ****131.25

	SUBJECT:			F FLORIDA INC.	ıffix)	
	Enclosed is an	original and o \$70.00 Filing Fee		he articles of incorpor \$122.50 Filing Fee		Z4 PH
i.il	FROM	[:	NDA C. LIE	FORD (Printed or typed)		_
vill pit		110	O OCEAN BY	/LD.		r 16 16 18 18
		OR	OND BCH.,	Address FLORIDA 32176		RECEIVED 97 JAN 24 PH 1:25 BIVISION OF CORPORATION
			(904) 44:	ity, State & Zip 1 -0555		EIVED PH 1:25 ORPORATION
			Daytim	e Telephone number		-

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:

VOP OF FLORIDA INC.

ARTICLE II PRINCIPAL OFFICE

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

1100 Ocean Shore Blvd. Ormond Beach, FL 32176



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:

David Wm. Lucks Sr. 1100 Ocean Shore Blvd. Ormond Beach, FL 32176

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):

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1100	Ocean d Bob	Blue	1 32176
		74.	

article 6		
Sinda C Hord	Sec. + Treamer	

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

24	day of	Oran	, 19	97.
•	_	7		

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

Layroud O. Hord
/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:	SECRE TALLA
VOP OF FLORIDA INC. (must include suffix)	THE PROPERTY OF THE PROPERTY O
2. The name and address of the registered agent and office is:	2:05 FSTATEA FLORIDA
DAVID WM. LUCKS SR. (NAME)	
1100 OCEAN SHORE BVLD. (P.O. Box or Mail Drop Box NOT ACCEPTABLE)	_
ORMOND BCH., FLORIDA 32176 (CITY/STATE/ZIP)	_
Having been named as registered agent and to accept service of process j corporation at the place designated in this certificate, I hereby accept the appointment and agree to act in this capacity. I further agree to comply with the prov	nimeni us registereu

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.