

P97000010788

TRANSMITTAL LETTER

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

FILED
97 FEB - 3 PM 6:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: RAY EMMONS AND ASSOCIATES, INC.
(Proposed corporate name - must include suffix)

000002067860--3
-01/24/97--01068--017
****131.25 ****131.25

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: RAYMOND L. EMMONS W97-2232
Name (Printed or typed)

1605 SOUTH MISSOURI AVE. 691
Address

CLEARWATER, FL. 34616
City, State & Zip

1-813-588-0005
Daytime Telephone number

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

Handwritten initials and number: 491 23-97



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

January 29, 1997

RAYMOND L. EMMONS
1605 SOUTH MISSOURI AVENUE
CLEARWATER, FL 34616

SUBJECT: RAY EMMONS AND ASSOCIATES, INC.
Ref. Number: W97000002232

We have received your document for RAY EMMONS AND ASSOCIATES, INC.
and your check(s) totaling \$131.25. However, the enclosed document has not
been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Jone

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) 487-6927.

Kathy Hyman
Document Specialist

Letter Number: 097A00004656

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:

RAY EMMONS AND ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

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

1605 SOUTH MISSOURI AVE.
CLEARWATER, FL. 34616

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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:

RAYMOND L. EMMONS
1605 SOUTH MISSOURI AVE
CLEARWATER, FLORIDA
34616

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):

RAYMOND L. EMMONS
1605 SOUTH MISSOURI AVE.
CLEARWATER, FLORIDA 34616

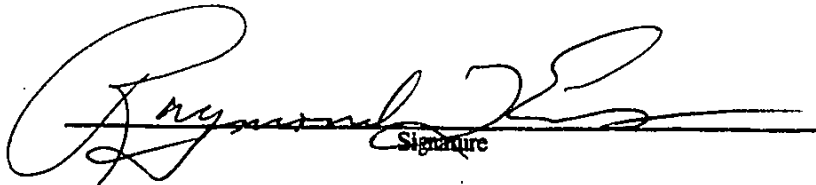
GEORGIENNE M. EMMONS
1605 SOUTH MISSOURI AVE
CLEARWATER, FLORIDA 34616

CHRISTINE M. EMMONS
1605 SOUTH MISSOURI AVE
CLEARWATER, FLORIDA 34616

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

20th day of JANUARY, 19 97.

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


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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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 RAY EMMONS AND ASSOCIATES, INC.

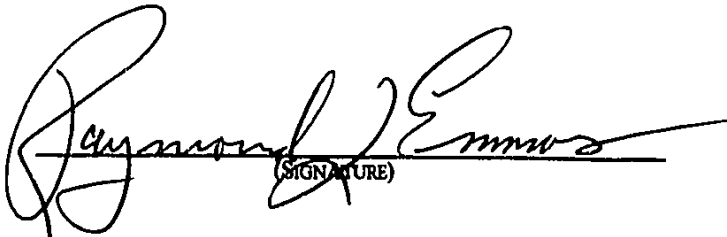
2. The name and address of the registered agent and office is:

RAYMOND L. EMMONS
(NAME)

1605 SOUTH MISSOURI AVE.
(P. O. Box or Mail Drop Box NOT ACCEPTABLE)

CLEARWATER FL. 34616
(CITY/STATE/ZIP)

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)

20 Jan 97
(DATE)