1999 ANSWIRE TERF 189

97 FEB 12 PH 3:32

TALLAMASSEL, FLORIDA

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

SUBJECT:	OUR TOWN NEWS INC.	to some west beliefe as	:X		
	(Proposed corpora	te name - must include suff	0002085779 -02/12/9701117005 ****131.25 ****131.29		
Enclosed is an original	inal 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	Signature 13.25 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL CO	PY REQUIRED		
FROM: _	MR. JAMES H. BUTLER Name (Printed	or typed)			
17105 TANGERINE BLVD.					
·	LOXAHATCHEE, FLORIDA		. /		
_	City, State	& Zip	- $0/l$		
_	1-561-791-9865 Daytime Teleph	one number	- (XX)14/97		

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

ARTICLES OF INCORPORATION

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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business a Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

OUR TOWN NEWS INC.

ARTICLE II PRINCIPAL OFFICE

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

OUR TOWN NEWS INC. 17105 TANGERINE BLVD. LOXAHATCHEE, FLORIDA 33470

ARTICLE III SHARES

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

1,000 (THOUSAND SHARES)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JAMES H. BUTLER 17105 TANGERINE BLVD. LOXAHATCHEE, FLORIDA 33470

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):

MR. JAMES H. BUTLER 17105 TANGERINE BLVD. LOXAHATCHEE, FLORIDA 33470

The unde	ersigned in	ncorporator(s) has(hav	e) executed these Arti	cles of Incorporation this
8th	day of _	FEBRUARY	, 1997	 ·
(An addit	ional artic	ele must be added if a	n effective date is requ	ested.)
		Jame 7	Butler	
			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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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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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	OUR TOWN NEWS INC.					
2. The name and address of the regis	stered agent and office is:					
	JAMES H. BUTLER					
	(NAME)					
	17105 TANGERINE BLVD.					
(P. O.	Box or Mail Drop Box NOT ACCEPTABL	E)				
	LOXAHATCHEE, FLORIDA	33470				
(CITY/STATE/ZIP)						
Having been named as registered as at the place designated in this certif to act in this capacity. I further agrand complete performance of my duas registered agent.	ficate, I hereby accept the appointme wee to comply with the provisions of a	nt as registered agent and agree all statutes relating to the proper				
Jame II. Butle (SKONATURE)	<u> </u>	2/8/97 (DATE)				