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TRANSMITTAL LETTER

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

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	riginal and one (1) co	opy of the articles	of incorporation a	and a check
for: \$70.00 Filing Fee		\$122.50 Filing Fee & Certified Copy Additional Cop	\$131.25 Filing Fee, Certified Copy & Certificate by Required	<u> </u>
FF	ROM: Same	prio / McCle/	llan	RECEIVE 97 HAR 12 PH DIVISION OF COR
		5.087 Sui	te 1 28	PHI2: 33
	ORI	ando Fla ity, State & Zip	32806	33 ation
	(402) 98	7-4235		

will washing

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

Daytime Telephone number





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:

A. Class Act III, INC.

ARTICLE II PRINCIPAL OFFICE

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

750 5.0.B.T. Suite 128 Orlando, Fla. 32806

ARTICLE III SHARES

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

49 5hacs

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Sonia L. McClellan 530 B. S. Conway Rd. Oxlando, Fla. 32807

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):

Sonia L. McClellan 530 B. S. Conway Rd. Oklando, Fla 32807

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: A Class Act III, INC.
2. The	name and address of the registered agent and office is:
	Sonia L MCCkllan
	530 B. S. Conway RQ. (P.O. Box or Mail Drop Box NOT ACCEPTABLE)
	ORlando Fla. 32807

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.

Soi L. M. M. March 12, 1997

(SIGNATURE) (DATE)