P9700035230 TRANSMITTAL LETTER

Steve Wilson, Inc.

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

Subject:

	(Proposed corporate name - must include suffi	x)
Enclos	sed is an original and One (1) copy of the articles of Incorp \$70.00 Filing Fee \$78.75 Filing Fee & Certificate \$122.50 Filing Fee & Certified Copy \$131.25 Filing Fee, Certified Copy and Certificate	oration and a check for: 400021478041 -04/18/9701048010 *****78.75 ******78.75
From	Steve Wilson, Inc.	
	Name (printed or typed)	9
	7862 Sanibel Drive Address	70 E E E E E E E E E E E E E E E E E E E
	Tamarac, Fl. 33321 City, State & Zip	TO: 35
	(954)720-6564	

Daytime Telephone number

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

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Articles Of Incorporation

FILED SECRETARY OF STATE CHASTE LEF CORPORATIONS

Of

97 APR 18 AM 10:36

Steve Wilson, Inc.	
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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:

Steve Wilson, Inc.

Article II - Principal Office

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

7862 Sanibel Drive Tamarac, Fl. 33321

Article III - Shares

The number of shares of stock that this corporation is authorized

1000 shares , no par value

Article IV - Initial Registered Agent and Street Address

The name and address of the initial registered agent is:

Steve Wilson 7862 Sanibel Drive Tamarac, FL 33321

Article V - Incorporator(s)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Steve Wilson 7862 Sanibel Drive Tamarac, FL 33321

The	ındersigned	l incorpora	tor(s) has(have) executed	these Ar	ticles	of Incor	poration this
	28th	day of	February	/ >/	, 19	97_		
			tue W	Signature				
				Signature				
		· · · · · · · · · · · · · · · · · · ·	·	Signature				<u></u>

Articles of Incorporation Filing Fee - \$35.00

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PRESENT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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:	Steve Wilson, Inc.	
2. The name and address of the re	egistered agent and office is:	
	Steve Wilson (Name)	19 1921 L6
-	7862 Sanibel Drive (P.O. Box not acceptable)	
<u></u>	Tamarac, FL 33321 (City/State/Zip)	Tions 36

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.

Steeller 4-4-97

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL. 32314

\$35.00 Designation of Registered Agent Fee