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

Progress + ASSUCIATES Inc.
(Proposed corporate name - must include suffix) SUBJECT:

> 700002150977---6 -04722797--01071--003 *****70.00 *****70.00

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

Shawn D Hidgen

Jackeonalle F1 32211 City, State & Zip

CICH 347 CAIS

Daytime Telephone number

FIAW IIIW

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



ARTICLES OF INCORPORATION

NAME

ARTICLE I

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

The name of the corporation shall be:	idgen + Herociates, Inc.
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be:	
7	Obl Old King Rd 6
<u> </u>	two Jacksonville, F1 32217
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:	
10	
ARTICLE IV INITIAL REGIST	ERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:	
	Shown Fridgeon 11061 Old Kings Past 100
	Jacksonville, FI 32217
ARTICLE V INCORPORATOR	Jacksonome, Process
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:	
	LaiDonna Martin
	MODEL OLD KINGS FOL 5 ALMO
	LowDonno Martin Mobil Old Kings Fol 5 #100 Tricksonville, Fl 32217
Lakema Martin	4.22.97
Signature/Incorporator	Date

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

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/Registered/Agent

4-22-97

Date