TRANSMITTAL LETTER

970000 3909

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

(Proposed corporate name - must include suffix)

900002160319---7 -04/30/97--01062--005 *****78.75 *****78.75

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

\$70.00 Filing Fee **2** \$78.75

Filing Fee

& Certificate

□\$122.50

□ \$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: William

20414 Front Beach Road

Parama City Beach FL 32413

964 - 233-3755 02904 784 -5554 Daytime Telephone number

MAY 1 - 1997

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

ARTICLES OF INCORPORATION

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

Districts Corporal	ποι πει, πεντος μασρισ	and following Articles of Incorporation.
ARTICLE I	NAME	
The name of the	corporation shall be:	

THE DOZIER CORPORATION

ARTICLE II PRINCIPAL OFFICE

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

20414 Front Beach Road Panama City Beach F1, 32413

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 Florida street address of the initial registered agent are:

William R Dozier 20414 Front Beach Road

ARTICLE V INCORPORATOR Parama City beach FL 32413
The name and address of the incorporator to these Articles of Incorporation are:

William R Dozier

30414 From Beach Read

Panama City Beach Fl 32413

Signature/Incorporator

W/27/97 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 27 97 Date