97 HAY 19 AH 11: 21 SEURE INSSEE, FLORDA

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

SUBJECT: Phodes Enter Prises, INC.
(Proposed corporate name - must include suffix)

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

FROM: Ben Phodes
Name (Printed or typed)

907 S.W. 38 CT.

BOYNTON Beach, FL 33435-City, State & Zip

56/-732-5834 or 56/-3>4-2704

Daytime Telephone number

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

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Rhodes Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

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

907 S.W. 38th Court Boynton Beach, Fl 33435

ARTICLE III SHARES

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

100 Shares of Capital Stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Ben Rhodes 907 S.W. 38th Ccurt Boynton Beach, F1 33435

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Ben Rhodes 907 S.W. 38th Court Boynton F1 33435

Signature/Incorporator

<u>5-15-97</u>

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 of registered agent

Signature/Registered Agent
