77000001443 Transmittal letter

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

SUBJECT:	F. F. L. (Proposed co	Jncorporate	e suffix)	_
			20000222 -07/02/97 ******70.0	01035012
Enclosed is an origi	nal and one(1) copy of the articles	of incorporation and a	check for :	-
52 \$70.00 Filing Fee	Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM	: Faye Name (Pi	Perry rinted of typed)		
		3336 Address		
	Lake (City,	State & Zip	2025	
	904 M. Dayilme T	SS 1075		
				<i>V</i>
\				V, 2
	NOTE: Please provide the or	riginal and one copy (of the articles.	11 3

ARTICLES OF INCORPORATION

Signature/Incorporator

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

ARTICLE I NAME	PH 12: 30
The name of the corporation shall be:	, I
F. F. L., Incorporated	30
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be:	
KI 6 BOX 3,236 3,025	
Rt 6 BOX 323B 32025 Cherokee Rd. Cake C. Ly, Fl. 30005	
ARICLE III SHARES	
The number of shares of stock that this corporation is authorized to have outstanding at any one time	is:
100 Shares	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS	
The name and Florida street address of the initial registered agent are:	
Faye Perry RH/6 BOX 383B - Cherokee Rd. ARTICLE V INCORPORATOR LAKE City, Fl. 32085	
ARTICLE V INCORPORATOR LAKE CIRY, PI. 30005	
The name and address of the incorporator to these Articles of Incorporation are:	
TOWN Derry	
Plicaropas	
14.678 3013 C	
Cherokey Ray 22005	
Rt. 6 Box 32/3B Cherosceg Rd. Care Citys F1. 32005	7

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

Date

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

Jane Verry (0-24-97)
Signature/Registered Agent Date