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

SUBJECT:

EDINA ENTERPRISE

(Proposed corporate name - must include suffix)

900002278219--8 08/27/97--01049--004 k***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

Filing Fee & Certificate **\$122.50**

\$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: JOHN

GIANOPOULOS Name (Printed or typed)

3709 SAN PABLO RD #2004

JACKSONVILLE, FL 32224-City, State & Zip

904 - 223 - 6078

Daytime Telephone number

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 Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE	I	NAME
	4	1 44 7 11 2 12

The name of the corp

NAME poration shall be:	EDINA	ENTERPRISE	INC.

ARTICLE II PRINCIPAL OFFICE

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

San Pablo Rd #2004

Jacksonville, FL 32224

ARTICLE III SHARES

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

50 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

3500 University Blod N Apr 3209 Jacksonville, FL 32211

INCORPORATOR ARTICLE V

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

JOHN GIANO POULOS

3709 SAN PABLORD #2004

JACKSONVILLE, FL 32224

(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