P970RAISMITALLECTER 76223

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 700002282487--7 -09/02/97--01097--019 ****131.25 ****131.25

SUBJECT:	Household	HELP! Inpropriete name - must include	suffix)
Enclosed is an original a	and one(1) copy of the article	es 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 CO	PPY REQUIRED
FROM: WAYNE CURTISS Name (Printed or typed)			
3630 BIRGER BO. Address			
		L. 33549	97 SEP -2 PH ON TALLAHASSEE.
City, State & Zip			

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

Daytime Telephone number

(813) 631 - 4059

TM-9/3/9>

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

The name of the corporation shall be:

Household ... HELP! Inc.

ARTICLE II PRINCIPAL OFFICE

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

3630 BERGER RD. LUTZ, FL. 33549

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

WAYNE CORTISS 3630 BERGER FO LUTZ, FL. 33549

ARTICLE V INCORPORATOR

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

WAYNE CURTISS, PRESIDENT 3630 BERGER BD.

LUTZ, FL. 33549

Signature/Incorporator

8.25.97

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

8.25.97

Date