PANAQUEEN/13

97 SEP 12 AN 10: 33

Department of State
Division of Corporations
P. O. Box 6327

SECRETARY OF STATE TALLAHASSEE, FLORIDA

700002291527--9 -09/12/97--01044-001 ****245.00 ****122.50

P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: SUSAN HILLMAN'S EYED Incorpora

(Proposed corporate name - must include suffix)

		eles of incorporation and a	check for
\$70.00 Filing Fee	S78.75 Filing Fee & Certificate	Filing Fee & Certified Copy	Certificate Certificate DPY REQUIRED
FROM:		(Printed or typed) Let Lone Address	
	fallah	en de De ly, State & Zip	<u>4-35</u> 2014
	SSO J. Daytim	7 JOO	3- 3EP (2.1091

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

ARTICLES OF INCORPORATION

FILED

97 SEP 12 AN 10:33

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The name of the corporation shall be: Lusen Hellman & Eyes fraggorated

ARTICLE II PRINCIPAL OFFICE

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

PO. Box 20834 Fallaharrel Dl. 32316

ARTICLE III SHARES

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

100 Shares

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Lever Hellmen tællaharre & Den 1209 Chel Lene tællaharre & 32304

INCORPORATOR

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

Lee Leve Ole 32304 Sept 12, 1997

(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