

TRANSMITTAL LETTER

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

FILED
97 SEP 17 PM 12:08
TALLAHASSEE, FLORIDA

SUBJECT: AMERICAN DREAM ASSOCIATES, INC.

I enclose an original copy of the Articles of Incorporation for the above corporation and a check in the amount of \$78.75.

SIGNED:  _____

2

From:

MELROSE ACCOUNTING & TAX SERVICE, INC.
Name

P.O. Box 1430
Address

Melrose, Fl. 32666
City, State, Zip

(904) 284-9665
Telephone Number

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*****78.75 *****78.75

P. CHAMBER

SEP 18 1997

ARTICLES OF INCORPORATION
OF
AMERICAN DREAM ASSOCIATES, INC

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I
NAME

The name of the corporation shall be: AMERICAN DREAM ASSOCIATES, INC.

ARTICLE II
PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 395 W. Madison St. Starke, Florida 32091.

ARTICLE III
CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000.

ARTICLE IV
INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Elaine Gouin
P.O. Box 502
Keystone Heights, Fl. 32656.
OFFICE:
6981 SW 100 ST HAMPTON FL 32044

ARTICLE V
INCORPORATORS

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

Jenny Mann
Star Rt 1 Box 92 EE
Hampton, Florida 32044

Elaine Gouin
P.O. Box 502
Keystone Heights, Fl. 32656

The undersigned has executed these Articles of Incorporation this 5th day of September, 1997.



Incorporator

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is:

AMERICAN DREAM ASSOCIATES, INC.

2. The name and address of the registered agent and office is:

ELAINE GOVIN

6981 S.W. 100th St.

Hampton, Fl. 32044

Signature: Elaine Govin
Title: President
Date: 9/11/97

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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: Elaine Govin
Date: 9/11/97