P9700088844

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

SUBJECT: PRU	vust + Assum (Proposed on	ci'A te s Imt opporate name - must include	lennation me esuffix)	Inc.
Enclosed is an original a	nd one(1) copy of the article		****131.2	09048 -01069001 5 ****131.25
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	Filing Fee Certified Copy & Certificate	의 뜻
FROM: Name (Printed or typed)				
TACKSWUITE FL. 32258 City, State & Zip 904-880.0413				
904-880.0413 Daytime Telephone number				

 $\begin{tabular}{ll} \textbf{NOTE:} & \textbf{Please provide the original and one copy of the articles}. \end{tabular}$

ARTICLES OF INCORPORATION

Signature/Incorporator

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

ARTICLE I NAME	
The name of the corporation shall be:	Associates International, Inc
ARTICLE II PRINCIPAL OFFICE	9710
The principal place of business and mailing address of this corpo	oration shall be:
5057 Julington CREEK RUAD	
	oration shall be: 97 OCT 15
TACKSONVILLE, FL. 32258 ARTICLE III SHARES The number of shares of stock that this corporation is authorized 100	to have outstanding at any one time is:
100	30 30
ARTICLE IV INITIAL REGISTERED AGENT AL	
The name and Florida street address of the initial registered agen	
RANDY PRUDOST 5057, Julington Creek Road, JA	cksunville, FL. 32258
ARTICLE V INCORPORATOR	
The name and address of the incorporator to these Articles of I	incorporation are:
RANDY PRUVUST	•
5057 Julington Creek RUAN	
5057 Julington Creek Road SACKSONVIlle, FL. 32258	
	1 mm

(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 Date