## P97000097960 TRANSMITTAL LETTER

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

800002347348--3 -11/14/97--01056--017 \*\*\*\*\*70.00 \*\*\*\*\*\*70.00

SUBJECT: (Proposed corporate name - must include suffix)					
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•	-				
Enclosed is an original	l and one(1) copy of the artic	cles of incorporation and a	check for:		
<b>🖄</b> \$70.00	□ \$78.75	□\$122.50	\$131.25		
Filing Fee	Filing Fee	Filing Fee	Filing Fee,		
<b>-</b>	& Certificate	& Certified Copy	Certified Copy		
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!	ADDITIONAL COPY REQUIRED				
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FROM:	aren J. Nama	United or typed)			
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	(941) 385 8850	)			
,	Daytime	Telephone number	9: 06		
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NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

ARTICLES OF INCORPORATION		•		No.	
The undersigned incorporator, for the purpose of for Business Corporation Act, hereby adopts the following				LAN	77.00
ARTICLE I NAME	·	- -	·	587 ·	
The name of the corporation shall be:	· <del>·</del>	-		30	
Green Line Consulting.	Inc.			STATE ORIDA	
ARTICLE II PRINCIPAL OFFICE	-				<u>.</u> .
The principal place of business and mailing addr 8124 Hampshire Dr. Sebring, FL 33870	ess of this	corporation	shall be:	-	-
ARTICLE III SHARES			_		
The number of shares of stock that this corporati	on is autho	rized to hav	e outstanding a	t any one tim	ne is:
10000		•		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· .
ARTICLE IV INITIAL REGISTEREI			<u>REET ADDR</u>	ESS .	
The name and Florida street address of the initial Kare S. Wolfe 8124 Hampshire No. Sebriry FC 33870	registered	agent are:			
ARTICLE V INCORPORATOR  The name and address of the incorporator to the	ara Articlas	of Incomo	ration are:		
Karen S Wolfe 8124 Hampshire Dr.	oso macros	or moorpo	adon do.		
Sebricy, FL 33170  Signature/Incorporator	<b>-</b>		11/10/97	ate	<b>-</b>

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept serv	vice 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 we				
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				
Taren of Wolfe	11/10/97			
Signature/Registered Agent	Date			