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DIVISION OF CORPORATIONS

97 NOV 20 PM 12: 55

TRANSMITTAL LETTER

Department of State 11/20/97--01013--020 Division of Corporations P. O. Box 6327 *****78.75 *****78.75 Tallahassee, FL 32314 all-mer inc. SUBJECT: (Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$122.50 \$131.25 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate & Certified Copy Certified Copy & Certificate Mike Davis FROM: Name (printed or typed) P.O. BOX 565

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

Address

City, State & Zip

Daytime Telephone number

904-461-8321

Flagler Beach, Fl 32136

ARTICLES OF INCORPORATION OF PAIR 55

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

ARTICLE I NAME

The name of the corporation shall be: .

all-mer inc.

ARTICLE II PRINCIPAL OFFICE

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

P.O. BOX 565 FLAGLER BCH., FL. 32136

ARTICLE III SHARES

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

1000 SHARES COMMON NO PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MIKE DAVIS 487B MIDWAY DR OCALA, FL 34474

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MIKE DAVIS 487 B MIDWAY DR. OCALA, FL 34474

The unde	rsigned in	corporator(s)	has(have) execut	ed these Articles of	Incorporation this
	14	day of	NOVEMBER	, 19 <u>97</u> .	
		el.	Signature	and the second of the second o	<u></u> .
			Signature		
,			Signature		

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: <u>all-mer inc.</u>	<u></u>				
2. The name	e and address of the registered agent and office is:					
	MIKE DAVIS					
(Name)						
	487 B MIDWAY DR.	-				
	(P.O. Box not acceptable)	· -				
	OCALA, FL. 34474					
	(City/State/Zip)					
Having bee above state the appoint to comply w mance of m as registere	n named as registered agent and to accept service of proces d corporation at the place designated in this certificate, I he ment as registered agent and agree to act in this capacity. I with the provisions of all statutes relating to the proper and co y duties, and I am familiar with and accept the obligations of ed agent.	ss for the reby accept further agree implete perfor- my position				
	(Signature) (Date)	\				