# P97000/02477

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 400002361714--1 -12/03/97--01025--011 \*\*\*\*122.50 \*\*\*\*122.50

CLUB IFCT.	LeJeåne	Service,	inc.		, <u>L</u>		
SUBJECT:	(Proposed						
		-					
Enclosed is an origin for:  [] \$70.00  Filing Fee	Silin	e (1) copy 78.75 g Fee tilicate	of the articles of    \times \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$131.25 Filing Fee, Certified Cop & Certificate	LAHASSE	97 DEC -3 AM 8: 10	FILED
FROM	Λ: <u></u> _	LeJeune	Shell (printed or typed)		<u>-</u>		
•		660 N. V	V. 42nd Ave.			,	
•		• •	Address	3,	<del></del>		
		Miami, I	F1 33126		·		
		Ci	ty, State & Zip				
		305-444	-0866		· ;		
		Daytime	e Telephone number				

F. CHESSER DEC 5 1997

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

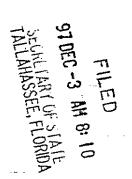
## ARTICLES OF INCORPORATION

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! NAME

The name of the corporation shall be:

LeJeune Service, Inc.



### ARTICLE II PRINCIPAL OFFICE

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

660 N. W. 42nd Ave.

Miami, Fl 33126

#### ARTICLE III SHARES

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

FIVE HUNDRED SHARES (500) AT ONE DOLLAR (\$1.00) PAR

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WALKER HOWREN: 111

334 Azure Way Miami Springs, Fl 33166

#### ARTICLE V INCORPORATOR(S)

	ess(es) of the incorporator(s) to these Arti	icles of Incorpora-
The name(s) and street addre	issies) of the moorpolatories	
tion is(are):		

WALKER HOWREN 111

334 Azure Way Miami Springs, F1 331.66

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1st <u>day of</u> <u>December</u>, 19<u>97</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: LeJeune Service, Inc.	
	<u></u>
A	当97
2. The name and address of the registered agent and office is:	EC-3
Walker Howren III	ASSEC,
(Name)	81 P
334 Azure Way	NE O
(P.O. Box not acceptable)	
Miami Springs, Fl 33166 (City/State/Zip)	
Having been named as registered agent and to accept service of process above stated corporation at the place designated in this certificate, I here the appointment as registered agent and agree to act in this capacity. I to comply with the provisions of all statutes relating to the proper and commance of my duties, and I am familiar with and accept the obligations of as registered agent.    X	s for the eby accept further agree mplete perfor my position