

P97000102477

TRANSMITTAL LETTER

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

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400002361714--1
-12/03/97--01025--011
****122.50 ****122.50

SUBJECT: LeJeune Service, Inc.
(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
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

FILED
97 DEC -3 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM: LeJeune Shell
Name (printed or typed)
660 N. W. 42nd Ave.
Address
Miami, FL 33126
City, State & Zip
305-444-0866
Daytime Telephone number

F. CHESSEY 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 I NAME

The name of the corporation shall be:

LeJeune Service, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: III

334 Azure Way
Miami Springs, Fl 33166

ARTICLE V INCORPORATOR(S)

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

WALKER HOWREN III

334 Azure Way
Miami Springs, FL 33166

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

1st day of December, 1997.

x Walker Howren III
Signature

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.

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

Walker Howren III

(Name)

334 Azure Way

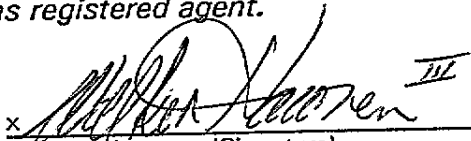
(P.O. Box not acceptable)

Miami Springs, FL 33166

(City/State/Zip)

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TALLAHASSEE, FLORIDA

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.

x 
(Signature)

12/1/97
(Date)