97000108707

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

400002384504--9 -12/29/97--01095--001 ****131.25 ****131.25

JECT: <u>1757</u>	TORA J DA (Proposed corp	porate name - must include suff	fix)
\$70.00	\$78.75	cles of incorporation and a c	2 \$131.25
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate

Name (Printed or typed) 01-01-98

9 Miz-30-97

EFFECTIVE DATE

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:	effective date 01-01-98
Ashford & BARNES INC.	
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: P. O. Box 160133 Miami, Hoeida 33116-0133	FILED 97 DEC 29 PM 12: 51 SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

EARL T. BARNES

9807 S.W. 119TH ANE

MINNI, HORI'DA 33186

ARTICLE IT

EARCHUE STAKE JANUARY 15t 1998

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

EARL T BARNES - PRESIDENT	
P.O. BOX 160133 9807 S.W. 119th AVE MIAMI, Florida 33116-0133 MAMI, Florida 33180	
	,
Cynthia I. BARNES	
P.O. Box 160133 MAMI, FLORISA 33116-0133	
SAMANTHA V. BARNES (5) yEARS OLL	
Miaml, Alonda 33116-0133	
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this	
9 day of 15c54652, 1997	
(An additional article must be added if an effective date is requested.)	
Signature	
Signature	
Signature	

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

	EFFECTIVE DATE 01-01-98
1. The name of the corporation is ASHARI GRANTS IN).t.
2. The name and address of the registered agent and office is:	97 SECR TALL/
EARL T. BARNET (NAME)	FILE DEC 29 DETARY OF
(P. O. Box of Mail Drop Box NOT ACCEPTABLE)	D PN 12: 51 PN 12: 51
Minny, FLOA/SA 33/86 (CITY/STATE/ZIP)	_

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)