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FLORIDA DIVISION OF CORPORATIONS
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O: DIVISION OF CORPORATIONS

FAX #: (850) 922-4001

FROM: FAS-T CORP. AGENTS, INC.
CONTACT: LIDIA FERNANDEZ
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FAX #: (305) 716-0346

NAME: KEATH JONES HARVESTING, INC.
AUDIT NUMBER.....H98000000212
DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1-7-98

ARTICLES OF INCORPORATION
OF

KEATH JONES HARVESTING, INC

ARTICLE I NAME

The name of the corporation shall be:

KEATH JONES HARVESTING, INC

ARTICLE II PRINCIPAL OFFICE

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

3535 SUNRISE BLVD

FORT PIERCE, FL 35982

ARTICLE III CAPITAL STOCK

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

ONE THOUSAND (1000)

PREPARED BY: TRIPLE CHECK INCOME TAX SERVICE
2506 DELAWARE AVE.
FT. PIERCE, FL 34947
(561) 461-5987

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TALLAHASSEE, FLORIDA

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

KEATH JONES

3535 SUNRISE BLVD

FORT PIERCE, FL 34982

ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

KEATH JONES

3535 SUNRISE BLVD

FORT PIERCE, FL 34982

The undersigned has executed these Articles of Incorporation this 6TH day of JANUARY 1997.


KEATH JONES, Incorporator

CERTIFICATE OF DESIGNATION

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.

1. The name of the corporation is:

KEATH JONES HARVESTING, INC

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

KEATH JONES

3535 SUNRISE BLVD

FORT PIERCE, FL 34982

Signature:

PRESIDENT

Title:

JANUARY 6, 1998

Date:

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:

Date: JANUARY 6, 1998

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