98 JAN -9 AM 10: 05

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

SUBJECT:	Timory De	Johnson.	INC.	_	
SUBJECT:	(Proposed corpo	rate name - must include su	iffix)		
			100002394 -01/09/98 ****172.50	-01012001	
Enclosed is an original	and one(1) copy of the article	es 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		
		ADDITIONAL CO	OPY REQUIRED		
FROM: _	6302 B	Address		RECEIVED	
	850-877-2091  Daytime Telephone number				
			P. Hall JAN -	9 1998	

FILED

## ARTICLES OF INCORPORATION

JAN -9 AM 10: 05

The undersigned incorporator, for the purpose of forming a corporation under the Florida SECRETARY OF STATE Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTI	<u>CLE</u>	I	<u>NAME</u>
TIV II	<u> </u>	_	

The name of the corporation shall be:

Jimmy D. Johnson INC.

PRINCIPAL OFFICE

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

4819 Capita (Circle S. W. TAllahassee, Fla. 32310

SHARES ARTICLE III

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

100 -

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and Florida street address of the initial registered agent are:

Jimmy D. Johnson 4819 CAPITAL CIRCLE S.W. TALLA HASSEE, FLA. 32310

INCORPORATOR

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

Jimmy D. Johnson / President 6302 Brushy CROCK Rd TALLA MASSEE, FLA. 3231/

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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 Registered Agent