P9890009174

(Proposed corporate name - must include suffix)

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

500002412486--3 -01/27/98--01008--009 ******78 75 ******78.79

Enclosed is an original ar	nd one(1) copy of the article	s of incorporation and a c	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	PY REQUIRED	
FROM:	Jameson Bea	Printed or typed)		
	2920 SE 148h	Olace road Address	98 JAN 27	SECRET
ح <u>ح</u>		ocyclos 34491 , State & Zip	N 27 AM 11:	ARY OF STA

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

359-245-3252 Daytime Telephone number

18/15

ARTICLES OF INCORPORATION

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

ARTICLE I N	IA	ME
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The name of the corporation shall be:

AT YOUR DOOR inc.



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

2920 S.E. 148th place road

Summer Reld, Florida 34491

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Annemarie Minton

2980 SE 148 th place road

Summer Field Florida 34491

ARTICLE V INCORPORATOR

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

JAMISON Brown

2920 SE 148th place road

Summerfield Florida, 34491

Kimum Basim
Signature/Incorporator

1-15-98

Date

(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

Date