P98800019858

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

500002433345---4 -02/17/98--01101--014 ****131.25 ****131.25

SUBJECT:	KATIE MICHAEL (Proposed corpor	ate name - must include sur	RATED Hix)		
Enclosed is an original	inal and one(1) copy of the articles	s 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 COPY REQUIRED			
FROM	i: VELIDELA CAISON Name (Pr	MAASIA I			
	7121 CARAWAY	LANE Address	 .	981	DIVISI

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

O- 205- 3569 Daytime Telephone number

214,98

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 NAME

The name of the corporation shall be:

KATIE MICHAELS, MCDRPORATED

ARTICLE II PRINCIPAL OFFICE

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

7/21 CARAWAY LANE SOUTHPORT, FLORIDA 32409

ARTICLE III SHARES

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

One Hundred

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

WENDELA CAISON MANSINI 7121 CARAWAY LAWE SOUTHPORT, FLORIDA 32409

ARTICLE V INCORPORATOR

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

WENDELA CAISON MANSINI 7121 CARAWAY LANE SOUTHPORT, FLORIDA 32409

Signature/Incorporator

2/10/98 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