## 99800 PM SM 1951434

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

000002549320--6 -05/05/98--01089--011 \*\*\*\*\*131.25 \*\*\*\*131.25

SUBJECT: SPONTOGNAPHY IN CONSONATED (Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee

\$78.75 Filing Fee

& Certificate

□\$122.50

\$131.25

Filing Fee
& Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: BILL TUERS

Name (Printed or typed)

4121 NE 22 AVENUE

Address

LIGHTHOUSE POINT FL 33064

City, State & Zip

**3** 954 942 1859

Daytime Telephone number

98 JUN -5 PM 12: 21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

M69-98

ARTICLES OF INCORPORATION	SE(
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	FILED MIN-5 PA MINASSEE.
The name of the corporation shall be:	STAR FLOR
SPORTOGRAPHY INCORPORAT	EBM =
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be:	
4121 NE 22 MENUE	
LIGHTHOUSE POINT FL 33064	
ARTICLE III SHARES	
The number of shares of stock that this corporation is authorized to have outstanding at any	one time is:
100	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRES	<u>ss</u>
The name and Florida street address of the initial registered agent are:	
BILL TUERS YILL NE 2~ AVE	
LIGHTHOUSE POINT FL 33064	
ARTICLE V INCORPORATOR	
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:	
BILL TUERS	
4/21 NE ZV AVE	
LIGHTHOUSE POST FL 33064	

(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

Signature/Incorporator

Date