TRANSMITTAL LETTER 0056184 rtment of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314 JS DESVA **SUBJECT:** (Proposed corporate name - must include suffix) 700002567817 - 1-06/22/98 - 01068 - 011 ****122.50 ****122.50 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$131.25 \$122.50 **\$70.00** \$78.75 Filing Fee, Filing Fee Filing Fee Filing Fee & Certified Copy Certified Copy & Certificate & Certificate ADDITIONAL COPY REQUIRED INC FROM: Name (Printed or typed) N LAKE DR. 115 Address <u>-.34786</u> City, State & Zip 76 110 Daytime Telephone number 86 AM 8:25 NOTE: Please provide the original and one copy of the articles. $\overrightarrow{\Box}$

ARTICLES OF INCORPORATION

17ALLAHA22 AH 8: 25 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:

PRINCIPAL OFFICE ARTICLE II

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

DESERT DESIGNS



INC

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:

INCORPORATOR ARTICLE V

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

DOWN WAKE DE WINDER MARE, FL 34786 - 2 6/15/98 JIM DOYLE Signature/Inco

(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

6/15/

Signature/Registered Agent