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TRANSMITTAL LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JUL - 1 PM 12:22

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

SUBJECT: Southern Lifestyles Enterprises, Incorporated

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee & Certificate

200002577552--7

-07/01/98--01058--003
*****78.75 *****78.75

FROM: Southern Lifestyles Enterprises, Incorporated
8056 St. Andrews Circle
Orlando, FL 32835

407-523-4119

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

Walter G. Pettillo GAVE
AUTHORIZATION BY PHONE TO
CORRECT Suffix
DATE 7/28/98
DOC. EXAM Doris Brown

D. BROWN JUL - 2 1998

ARTICLE 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:

Sothorn Lifestyles Enterprises , Incorporated

Article II Principal Office

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

**8056 St. Andrews Circle
Orlando, FL 32835**

Article III Shares

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

1000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

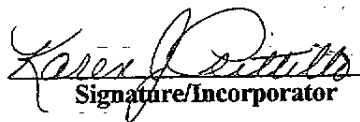
The name and Florida address of the initial registered agent are:

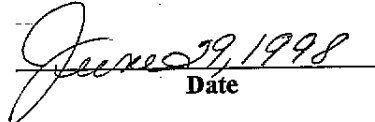
**Karen J. Pittillo
8056 St. Andrews Circle
Orlando, FL 32835**

ARTICLE V INCORPORATOR

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

**Karen J. Pittillo
8056 St. Andrews Circle
Orlando, FL 32835**

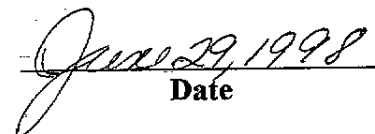

Signature/Incorporator


Date

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

Having been named 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

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