TRANSMIT (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	TAL LETTER 1059836
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	ON SECRETAR CORPORATION OF STATE
SUBJECT: Three Earls I (Proposed co	nc- orporate name - must include suffix)
Enclosed is an original and one(1) copy of the article  \$70.00 \$78.75  Filing Fee Filing Fee & Certificate	10002577591—6 -07/01/9801058017 ****131.25 ****131.25 es of incorporation and a check for :  \$\sum_{\text{\$131.25}}\$ Filing Fee \$\text{\$Certified Copy} & Certified Copy} \$\text{\$\$Certificate}\$
	ADDITIONAL COPY REQUIRED
FROM: Earl E. Shi-	fle H rinted or typed)
1000 Eyerl	Address
Port St John City,	nn FL 32927 State & Zip

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

## SOUL MARINE

## 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.

The name of the corporation shall be.
Three Earls Inc.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
1000 tyerly St.
Port St. Down, FL 32927
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
1000 Shares Total
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
Earl E. Shiflett
1000 Eyerly St Port St John Fl 32927
POCTST JOHN + 2 22921
ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:
Earl E. Shiflett
1000 Eyerly St
1000 Eyerly St Port St. John, FL 32921
Earl & Shillott
Signature/Incorporator 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

28, 98

Date