* TRANSMITTAL LETTER

Department of State Division of Conforation P. O. Box 6327 Tallahassee, FL 32314		5	943	57
SUBJECT:		In Corpa		
		d sood	1025518: 06/08/98011 ******78.75 *	995 40014 ****78.75
Enclosed is an original	and one(1) copy of the articl	es 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 CO	PY REQUIRED	
FROM:	Edwin Name (P	Foster (rinted or typed)		SKUKE
Po Box 848				
	Seffue	Address RFL, 3 State & Zip	3583°	-2 PM 12: 21

W 72. 74359 25 44 NOTE: Please provide the original and one copy of the articles.

JUL 6 1998

F. CHESSER



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 10, 1998

EDWIN FOSTER P O BOX 848 SEFFNER, FL 33583

SUBJECT: C & E INCORPORATED Ref. Number: W98000013278



We have received your document for C & E INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6904.

Freida Chesser Corporate Specialist

Letter Number: 998A00032491



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 23, 1998

EDWIN FOSTER P O BOX 848 SEFFNER, FL 33583

SUBJECT: CEF INCORPORATED Ref. Number: W98000014359



We have received your document for CEF INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6904.

Freida Chesser Corporate Specialist

Letter Number: 598A00034464

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:

ARTICLES OF INCORPORATION

PRINCIPAL OFFICE IIThe principal place of husiness and mailing address of this corporation shall be:

Circle 33584 604 AUXERRE SEFFNER

PO BOX 848 MAILIN9! SeffNER FL 33583

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

INITIAL REGISTERED AGENT AND STREET

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

(Edward ARTICLE V INCORPORATOR (

(MRE PRESIDENT)

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

Edwin Foster Box

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