P98000066899

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	40	000025990245 -07/27/9801040021 ****131.25 ****131.25
SUBJECT: Brian B. S.	mith, Inc. name - must include suffix)	· · · · · · · · · · · · · · · · · · ·
Enclosed is an original and one (1) copfor: \$70.00 \$78.75 Filing Fee & Certificate	X \$122.50	ation and a check 31.25 g Fee, ed Copy rdificate
901 m Palm Co (561) 22	n K. Smith e (printed or typed) Prtin Downs 13/vd. # Address City, State & Zip 86-6359 The Telephone number	FILED 98 JUL 27 PM 1: 24 SECRETARY OF STATE TALLAHASSEE, FLORIDA

B. BROCK JUL 3 0 1998

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be:

. 1

Brian K. Smith, Inc.

PRINCIPAL OFFICE ARTICLE II

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

901 Martin Downs Blud. #309 Palm City, FL 34990

ARTICLE III SHARES

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

10,000

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and address of the initial registered agent is:

Brian K. Smith, 18.
901 Martin Downs Blud. #309
Palm City, FL 34990

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Brian K. Smith 901 Martin Downs Blud. #309 Palm City, FL 34990

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

J9// day of June 19_98.

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

.

1.	The name of the corporation is: Srian B. Smith, Inc	<u> </u>	
			-
2.	The name and address of the registered agent and office is:	 1	
	Srian B. Smith (Name)	98 JUL 2	7 - 2
	901 Martin Downs 15/14 # 309 (P.O. Box not acceptable)	ARY OF SSEE, FI	
	1.0. box 10 acceptable, 1.0. box 10 acceptable, (City/State/Zip)	1:24 STATE LORIDA	

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) (Date)