### TRANSMITTAL LETTER

# 7980000721GS

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

SUBJECT:	(Proposed con	porate name - must include su	ffix)		
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Enclosed is an original at \$70.00 Filing Fee	nd one(1) copy of the artic  \$78.75  Filing Fee  & Certificate	Language Service Servi	S131 Filing F Certifie & Certi	Fee, ad Copy ficate	
FROM:	JOHN BRIAN RI	EES	TREQU	ARED	
	Name (		 		
	JACKSONVILLE F		·	SECRE	98 AUG 1
·	904-731-2555	, State & Zip	· .	HASSEE, I	7. PH
	Daytime	Telephone number		STATE	2: 35

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

#### 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.

#### <u>ARTICLE I NAME</u>

The name of the corporation shall be:

HEALTH & ENERGY JNC.

98 AUG 17-PM 2: 35 SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE II PRINCIPAL OFFICE

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

3909 SUNBEAM ROAD # 514 JACKSONVILLE FL. 32257

#### ARTICLE III SHARES

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

100 SHARES WITH A PAR VALUE OF \$1.00 PER SHARE

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JOHN BRIAN REES
3909 SUNBEAM ROAD # 514 JACKSONVILLE FL. 32257

#### ARTICLE V INCORPORATOR

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

JOHN BRIAN REES 3909 SUNBEAM ROAD # 514 JACKSONVILLE FL. 32257

Signature/Incorporator

uG. 12 1998

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

12, 199

Date