

P.O. Box 6327 Tallahassee, FL 32314

200002638592---8 -09/14/98--01126--004 ****122.50 ****122.50

Re:	YOUND	, Inc
	(Name of Corporation)

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

98 SEP 14 AH 10: 59
TALLAHASSEE FLORIDA

Holen and Same

YOUNO
(Name of Corporation)

MAILING ADDRESS OF CORPORATION	
Robert Brown	
3214 Elsworth of BEACH, FL 3214	
PHONE -	<u> </u>
(904) 258 28 78 Area Code Number Ext.	Q

		ARTICLES O	F INCORPORATIO	V
	(),,,	1 %	of — .	
	90U		INC.	
		•	of corporation)	
The undersigne the following articles	d acting as the incor of incorporation fo	rporators of a corporation:	oration under the Florida E	susiness Corporation Act, adopt(s)
		ARTICLE I -	CORPORATE NAME	
The name of the	corporation is:	2000	INC.	
····				The St
			E II - DURATION	P P P P P P P P P P P P P P P P P P P
This corporation	ı shall exist perpetu	ally unless dissolve	ed according to Florida lav	V. CEFLOTE STATE
		ARTICL	E III - PURPOSE	ADA DA
The corporation United States and the	is organized for the State of Florida.	e purpose of engagi	ing in any activities or bus	iness permitted under the laws of the
The corporation	is authorized to iss		V - CAPITAL STOCK res of common stock, par	value \$ 1.00 per share.
The street addre	ss of the initial prin		TIAL PRINCIPAL OFFICE different, the mailing addr	=
STREET ADDRESS	344 81	SWORTH	STICET	
~			- rame	The cost of the state of
CITY DAYTO		1ch	FLORIDA	ZIP 32114
Mailing addres	s, if different			
STREET ADDRESS				
	SAME			
CITY			FLORIDA	ZIP
	ARTICLE	VI - INITIAL RE	GISTERED OFFICE AN	ND AGENT
The street addr	ess of the initial re	egistered office a	nd the name of the initia	I registered agent at the office is:
NAME ROB	ERT B	rown		
ADDRESS 34	1 Elsw	HTAU	STreeT	
CITY DAY TO	NA BEA	ch	FLORIDA	ZIP 32114

ARTICLE VII - INITIAL BOARD OF DIRECTORS

	· · · · · · · · · · · · · · · · · · ·	The number of directors may be
either increased or diminished from time to time by the By addresses of the initial director(s) of the corporation are as		than one (1). The names and
NAME ROBERT Brown		
ADDRESS 344 Elsworth	ST.	
CITY DAY to NA BEACH	STATE FLOTIA	- A ZIP 32/14
NAME THEOTA MCCLAINE		
ADDRESS 324 W. LINCOLN	51.	
CITY DAYTONA BEACH	STATE FL	ZIP 32114
NAME Ronnie DAVIS		
ADDRESS 325 8 57. APT.	·#/2	
CITY HO//Y Hill	STATE F/,	ZIP 32117
ARTICLE V.	III - INCORPORATORS	-
The names and addresses of the incorporators signing the		as follows:
NAME ROBERT Brown		
ADDRESS 3 44 Elsworth	ST.	
CITY DAYTONA BEACH	STATE FLON	12A ZP 32114
NAME THEOTA MCCLAINE		
ADDRESS 324 N. LINCOLN	ST	
CITY DAY TONA BEACK	STATE FL	ZIP 32114
NAME RONNIE DAVIS		
ADDRESS 325 8# ST. APT.+	* 12	
CITY HOLLY HILL.	STATE 77.	ZIP 32114
The undersigned incorporator(s) have executed these		
day of September	, 19 <u>98</u> .	
		7
	1 plent	(Signature)
	Theota n	ge Clary (Signature)
	Ronnie Davis	(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

	8 SEP LA
YOUND INC.	
(name of corporation)	FLORIDE STATE

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at _	<u> 3</u>	44 E	ISWORT	+	STreet	
	DAY	TONA	Beach	FL.	32114	_
has	s named .	Rob	PERT	Bro	wn	<u> </u>

located at the aforesaid address, as its registered agent to accept service of process within this state.

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