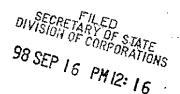
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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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SUBJECT:	, , , , ,	CONPANY			
	(Proposed corporate name - must include suffix)				
			·		
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :					
\$70.00	\$78.75	□\$122.50	<b>□</b> \$131.25		
Filing Fee	Filing Fee	Filing Fee	Filing Fee,		
	& Certificate	& Certified Copy	Certified Copy		
			& Certificate		
		ADDITIONAL CO	DV DEALIDED		
		ADDITIONAL CO	r i KeQUIKED		
FROM: _	PETE HESSER				
Name (Printed or typed)					
1100 P. C. DICTO-F S. P. C.					
-	1100 E. CORKTREE CIR. Address				
	PORT CHARLOTTE, FL 33952  City, State & Zip				
-	City, State & Zip				
941 - 764- 7680					
-	Daytime Telephone number				

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



. 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:

PPCH COMPANY

# PRINCIPAL OFFICE

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

1100 E. CORK TREE CIR.

PORT CHARLOTTO, FL 33952

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

100 COMMON SHAKES

# INITIAL REGISTERED AGENT AND STREET ADDRESS

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

PETE HESSON

1100 E. COLKTREE CIR. POLT CHARLOTTO, FL 33952

# INCORPORATOR

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

RETO HESSOR

1100 E. CORKTREE CIL.

PORT CHARLOTTE, FL 33952

(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