Pepartment of State 980000 9982 9

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

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SUBJECT:	IMI			
		(Proposed corpo	rate name - must include su	ffix)
Enclosed is an or	riginal and one((1) copy of the article	es of incorporation and	a check for :
☐ \$70.0 Filing Fe	e Filing Fe		□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FRe	OM: <u>ARTI</u>	HUR J. MI Name (Pr	CHAUD inted or typed)	
	143.	8 CROYDON	DRIVE ddress	SECO TALL
	CLE	ARWATER	FL , 3375(98 NOV 23 SECRETARY ALLAHASSE

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: JMI RESOURCE INC.



ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1438 CROYDON DRIVE CLERRUATER, FL. 33756

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: JOELLEN MICHAUD
1438 CROYDON DRIVE
CLERRUATER, FL. 33756

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are: ARTHUR J. MICHAUD
1438 CROYDON DRIVE
CLEARWATER, FL. 33756

Signature/Incorporator
ARTHUR J. MICHAUP

11-19-98

(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
JO ELLEN MICHAUD

<u> 11- 19- 98</u>

Date