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TRANSMITTAL LETTER

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

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Northern SUBJECT:	Palms Inte	Frlocking Pavers	inc.	, -
	oosed corporate r	name - must include suff	ix)	
Enclosed is an original a for: \$70.00 Filing Fee	nd one (1) co \$\times \\$78.75 Filing Fee \$ Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate	ind a check
FROM: Name (4832 Tamp		r L. Stevens printed or typed) Grove Point Drive Address a F1. 33624 c, State & Zip 960-3641		12 330 86° SECULLA SEC
•	Daytime Telephone number			RY OF STATE COSTORATIONS

8. BROCK DEC 2 4 19981

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 NAME

The name of the corporation shall be: Northern Palms Interlocking Pavers Inc.

ARTICLE II PRINCIPAL OFFICE

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

4832 Grove Point Drive Tampa F1. 33624

ARTICLE III SHARES

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

1000 Shares @ \$1.00 Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Trevor L. Stevens 4832 Grove Point Drive Tampa Fl. 33624

ARTICLE V INCORPORATOR(S)

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

Trevor L. Stevens 4832 Grove Point Drive Tampa F1. 33624

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

Articles of Incorporation Filing Fee - \$35

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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.

		(City/State/Zi	p)	, , , , , , , , , , , , , , , , , , , ,		
	(P.O. Box or Tampa Fl. 336	Mail Drop Bo 524	× <u>NOT</u> a	cceptable)	8:48.	ATE
		(Name) 4832 Grove Point Drive				RY OF ST
	Trevor L. Ste	שם חבר 7	SECRETA ISION OF			
2.	The name and address of the re	egistered ager	nt and o	ffice is:		QQ QVIII
1.	The name of the corporation is:	Northern	Palms	Interlocking	Pavers	Inc.

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)

(Data)