P9900000 7565 TRANSMITTAL LETTER

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

SUBJECT: _ Tim El	lis, Inc.				
(Proposed corporate	name - must include sc	ıffix)		
Enclosed is an origina	I and one (1) co	ppy of the articles o)— - -	102750509- 01/21/990110700 14*****78.75 ******70 and a check	
\$70.00 Filing Fee	× \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required	99, SEC, TALL	
FROM:	Tim Ellis			99 JAN SECKLITA ALLAHA	
	Name (printed or typed)		21 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
	818 NE Third Street		PM 2: PM 2: OF STA OF STA		
	Address		36 ATE RIDA		
	Ocala, FL 34470		25.11 Of		
	City, State & Zip				
	(352)690-1633			- -	
	Daytime 1	Telephone number	·		

5. SHOUK JAN 2 6 1999

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:

Tim Ellis, Inc.

99 JAN 21 PM 2: SECRETARY OF STA FALLAHASSEE, FLOO

ARTICLE II PRINCIPAL OFFICE

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

818 NE Third Street Ocala, FL 34470

ARTICLE III SHARES

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

1,000,000 (one million)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Rhianedd Ellis 818 NE Third Street Ocala, FL 34470

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Tim Ellis 818 NE Third Street Ocala, FL 34470

Rhianedd Ellis - Registered Agent 818 NE Third Street Ocala, FL 34470

The undersigned incorporator(s) has(have) executed these Art	ticles of Incorporation this
20th day of, 19 99	•
(An additional article must be added if an effective date is requ	uested.)
MA Signature	
Signature	

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

1. The name of the	corporation is:	Tim Ellis, Inc		
	-			
2. The name and ac	dress of the registe	ered agent and office is:		
				ZS 99
	Rhianed	d Ellis		
		(NAME)		三 三 三 三 三 二 三 二 二 二 二 二 二 二 二 二 二 二 二 二
	818 NE	Third Street		PH PH
	(P.O. Box o	or Mail Drop Box NOT ACC	EPTABLE)	SIP 5:
	Ocala,	Florida34470		SIDA 36
•		(CITY/STATE/ZIP)		
agent and agree to a	ict in this capacity. and complete perf	ent and to accept serv his certificate, I hereby I further agree to com formance of my duties, a agent.	accept the appoint	ment as registered
Munead	GIN			
	(SIGNATURE)		(DATE)	