79900008738

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

SUBJECT:

	(Floposed corpor	ate name - must melace sur		
				-014 *78.79
Enclosed is an origin	al and one(1) copy of the article	s of incorporation and a	check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	Name (I	Printed or typed)		_ ::
VED PM 2: 23 LOF STATE OR PORATIONS EE, FLORIDA	Qyingy F/ City 854)681-500	Address 3235/ , State & Zip Telephone number	SECRETARY UF STATE TALLAHASSEE, FLORIDA	FILED 2:32

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.

ARTICLE I NAME The name of the corporation shall be:	· · · · · · · · · · · · · · · · · · ·
The Mates INC.	99 J
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation.	on chall be:
Rt 3 Rox 2166 Quincy	1/3235/ Fig 2 8
ARTICLE III SHARES	RIGHT 32
The number of shares of stock that this corporation is authorized to h	have outstanding at any one time is:
100	
ARTICLE IV INITIAL REGISTERED AGENT AND	STREET ADDRESS
The name and Florida street address of the initial registered agent are	
1:54 T. BART: Eld	
L'SAT. BART. Eld 1303 Thomasville Rel Tallahass	er 1/32303
ARTICLE V INCORPORATOR	···
The name and address of the incorporator to these Articles of Incorporator	poration are:
LISAT. BARTIELD	
R+2 BNX 625	-
Qy:NC4, 8/3235/	
7,1	1 90 GA
Mit / Kardy	1-2877
Signature/Incorporator	Date
(A 1314)	
(An additional article must be added if an effe	ective date is requested.)
Having been named as registered agent and to accept service of process for the a certificate, I hereby accept the appointment as registered agent and agree to ac	
provisions of all statutes relating to the proper and complete performance of	
obligations of my position as registered agent	
The Total	7-28-99-
Signature/Registered Agent	Date