P990000 31238

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

SUBJECT:	Candles F (Proposed corpor	ate name - must include suffic	x)					
		70	000283C -04/06/991 *****78.75	01038016				
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:								
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COP	\$87.50 Filing Fee, Certified Copy & Certificate of Status					
FROM:	Name (Pr PH 19 BOX A Lake Cit	inted or typed) 800 Address Lift 3000 State & Zip	ALLAHASSEE, FLORIDA	APPROVED FILED 99 APR -6 AM II: 02				
	POUL SL Daytime To	-3850 elephone number		99 APR -				

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: Carolles RUS, Inc	= .			
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: PH 19, BOX 870, Lake Cuty, FL 3000	5			
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding a	t any (one time	is:	· ·
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADD The name and Florida street address of the initial registered agent are: Kristine Cummings, Rt 19, 80×800, La		_	14,1 3aC	FL
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are: Kristine Cummings, President Bruce Jewell, Vice President Rt 19, Box 870, Lake Cuty, Fl 30005 History Cummings Hickory		SECHETARY OF S	99 APR -6 AM	APANONIA NOVIGAN
(An additional article must be added if an effective date is reques	·	STATE ORIDA	11:02	Ö
Having been named as registered agent and to accept service of process for the above stated corporation certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. If provisions of all statutes relating to the proper and complete performance of my duties, and I and obligations of my position as registered agent.	mthor 1	raree to co		ish sha

Signature/Registered Agent