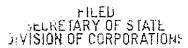
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TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	- - - -04/05/9301088013
SUBJECT: Mable J. Rockwell Jackson, Inc.	*****70.00 *****70.00
Proposed Corporate Name	
Enclosed is an original and one copy of the Articles of registered agent, and a check for \$70.00. Please return or with the filing date. FROM:	Incorporation, a designation of ne copy of the Articles stamped
Mable J. Rockwell Jackson	
Name (print or type)	
4957 Courtland Loop	577
Address	
Winter Springs, FL 32708 City, State, Zip	·
407-695-2079	<u>=</u>
Area Code and Phone Number (Daytime)	

99 APR -5 AH 9: 43

@_Purintum APR - 8 1999



ARTICLES OF INCORPORATION APR -5 AM 9:43 OF

(Name of Corporation)		
The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.		
ARTICLE 1: NAME The name of the corporation shall be: Mable J. Rockwell Jackson, Inc		
ARTICLE 2: PRINCIPAL PLACE OF BUSINESS The principal place of business of this corporation shall be (give street address and zip code): 4957 Courtland Loop Winter Springs, FL 32708		
ARTICLE 3: SHARES All stock issued by this Corporation shall be common voting stock of a single class. The number of shares of stock that this corporation is authorized to have outstanding at any time is:		
ARTICLE 4: INITIAL REGISTERED AGENT AND REGISTERED OFFICE The name of the initial registered agent is Mable J. Rockwell Jackson		
whose registered office is located at the place of business stated in Article 2 above.		
ARTICLE 5: INCORPORATOR		
The name and street address of the incorporator to these Articles of Incorporation is:		
Mable J. Rockwell Jackson 4957 Courtland Loop Winter Springs, FL 32708 The undersigned incorporator has executed these Articles of Incorporation this 31 Day of March , 1999		
Mela a Drahuma Drah		

Mable J. Rockwell Jackson, Inc.

Articles of Incorporation Filing Fee — \$35.00

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to Florida law, the undersigned Corporation organized under the of Florida submits the following statement in designating the registered agent, in the State of Florida. 1. The name of the corporation/professional association is: Mable J. Jackson, Inc.	office/registered
2. The name and address of the registered agent and office is:	
Mable J. Rockwell Jackson Full name	
4957 Courtland Loop Address (P.O. Box not acceptable)	= :
Winter Springs, FL 32708 City, State, and Zip	- -

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.