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

200002915762---06/25/99--01066--016 *****78.75 *****78.75

SUBJECT:		NED'S INC	-
	(Proposed corporate name - must include suffix)		

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee

X \$78.75 Filing Fee

& Certificate of Status

■\$78.75

Filing Fee & Certified Copy \$87.50

Filing Fee,

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:	ANNE MARIE FARRELL			
	Name (Printed or typed)			
	P.O. BOX 602			
	Address			
	CRYSTAL SPRINGS, FL 33524			
	City, State & Zip			
	813-182-5966			
	Daytime Telephone number			

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.

<u>ARTICLE</u> I

The name of the corporation shall be:

UNCLE NED S ≰ INC ♣

ARTICLE II PRINCIPAL OFFICE

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

UNCLE NED'S P.O. BOX 602 CRYSTAL SPRINGS, FL 33524

SHARES ARTICLE III

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

100 Shares @ \$10.00 (\$1000.00)

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Anne Marie Farrell Anne Marie Farrell 10625 Paul Buchman Hwy Blant City, F1 33565 P.O. Box 602 The name and address of the incorporator to these Articles of Incorporation are: Anne Marie Farrell 10625 Paul Buchman Hwy Plant City, F1 33565 6/23/99 Date Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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/Registered Agent

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