FILED 99 JUL -8 AM 10: 57

Department of State

Division of Corporations	200002926
P. O. Box 6327	-07/08/990
Tallahassee, FL 32314	*****78.75
SUBJECT: National (Prop	Commercial Justinents osed corporate name - must include suffix)
Enclosed is an original and one(1) copy of the	articles of incorporation and a check for:
<b>□</b> \$70,00 <b>□ □</b> \$78,75	□\$122.50 □ \$131.25
Filing Fee Filing Fee	Filing Fee Filing Fee,
& Certificate	& Certified Copy Certified Copy
ee continued	& Certificate
	ADDITIONAL COPY REQUIRED
FROM: SUSANK.	ADA ~ S ame (Printed or typed)
	Address TSLAND CIRCLE
LowCuoo	D F1, 32779 City, State & Zip
407-788	time Telephone number
Day	rume 1 elephone number
AUJAN (WAMY_GAVE	
DRIZATION BY PHONE TO	
ECT Act I	-

NOTE: Please provide the original and one copy of the articles.

99 JUL -8 AH 10: 57
TALLAHASSEE STATE

## 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:
Mational Commercial Investments, Inc.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
P.O. BOX 915221 LONGWOOD F1 32791-5221
f
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
19,000
10,000
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
SUSANK.ADAMS
808 Sweet WATER ISLAND Circle LONGWOOD, Fl. 32779
ARTICLE V INCORPORATOR  The name and address of the incorporator to these Articles of Incorporation are:
SUSANKADAMS
808 Sweet WATER ISLAND Circle
LONGWOOD, F1. 32779
Susan K. adams July 5, 1999

(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

Signáture/Incorporator

buly 5, 1999 Date

Date