P990 (TRAISMITTAL EFTER 528

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

Tallallassee, FL 32314			
SUBJECT: Jetting elma (Proposed corpor	age name must include sur	ffix)	
	80	000029464 -07/30/9901 *****87.50	1585 099010 *****87.50
Enclosed is an original and one(1) copy of the articles	s of incorporation and a	check for:	,
☐ \$70.00 ☐ \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: <u>Lee S. BLAn</u> Name (Pri	inted or typed)	99 JUL 3 SECRETT TALLAHA	T]
St. Peterson	ddress	33 Jan 19	

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

Daytime Telephone number

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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:
titting dwage, dre.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
657 Central ave. It. Petersburg, Al. 33701
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
\$ 10,000 41. par value
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
I all a section and a section and a section agent are:
157 Cartal airl.
1x P.T. Irung. Al. 33701
ARTICLE V INCORPORATOR
The name and address of the incorporator to these Articles of Incorporation are:
Lee S. Blanchard
657 Sentry ave. 3370/
2-25-99
Signature/Incorporator, Date
Lee S. BLANCHARd
(An additional article must be added if an effective date is requested.)
the state of the s
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this
tertificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I first be 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 ugent
Signature/Registered Agent Date
Signature/Registered Agent Date

Date