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VIOLET F MAYNARD 1428 LAKE PLEASANT RD APOPKA, FL 32703 500002960075--1 -08/16/99--01008--001 ******78.75 ******78.75

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

August 5, 1999

VIOLET F MAYNARD 1428 LAKE PLEASANT RD APOPKA, FL 32703

SUBJECT: S V C ENTERPRISES, INC.

Ref. Number: W99000018168

We have received your document for S V C ENTERPRISES, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$78.75.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

PLEASE SEND THE CHECK TO MY ATTENTION AT THE ADDRESS BELOW.

YOUR ARTICLES WILL BE HELD IN MY "PENDING FOLDER" UNTIL I RECEIVE YOUR CHECK.

If you have any further questions concerning your document, please call (850) 487-6919.

Beth Register Corporate Specialist Supervisor

Letter Number: 499A00039764

See church

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:

S V C ENTERPRISES, INC.

ARTICLE II PRINCIPLE OFFICE

1428 S LAKE PLEASANT RD APOPKA, FL 32703

ARTICLE III SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS:

THE NAME AND FLORIDA STREET ADDRESS OF THE INITIAL REGISTERED AGENT ARE:

VIOLET F. MAYNARD 1428 S LAKE PLEASANT RD. APOPKA, FL 32703

ARTICLE V INCORPORATOR
THE NAME AND ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION ARE:

VIOLET F MAYNARD 1428 S LAKE PLEASANT RD. APOPKA, FL 32703

SIGNATURE/INCORPORATOR

DATE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATED 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.

CICNIA TUDE (NICOPROPATOR

DATE