TRANSMITTAL LETTER					
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314					
SUBJECT: Alimat, +nc. (Proposed corporate name - must include suffix)					
600002962006—=3 -08/17/9901048003 ******78.75 *****78.75 Enclosed is an original and one(1) copy of the articles of incorporation and a check for :					
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	3764 Forsyth A Tallahassee City, s	FL 32308 State & Zip	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

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.

ARTICLE I

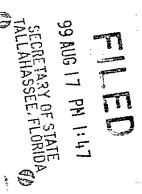
The name of the corporation shall be:

Alimat, Inc.

ARTICLE II

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

A Child's Dream 2521 Mahan Drive Tallahassee, Florida 32308



ARTICLE III

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

1000 (common)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Barry G. Hartin 2521 Mahan Drive Tallahassee, Florida 32308

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Jeanine Hartin 3764 Forsythe Way Tallahassee. Florida 32308

dearine Hartin	8/17/99
Signature/Incorporator	Date

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 accept the obligations of my position as registered agent.

Signature/Registered Agent B-17-99

Date