TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327

EFFECTIVE DATE

-08/16/99-01034--008 ****78.75

Tananassee, FL 3231	8.	9-99	6) ، (5) ****** ک
SUBJECT:	Anthony l	Placek, Inc. rate name - must include suff	SECRET
Englosed is an origina	(Proposed corpor		SSEE, FLORIDA
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee _& Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	ADDITIONAL COPY REQUIRED Anthony Placek		
	Name (Printed or typed) 5009 Pocatella Avenue Address		
	North Port, FL 34287 City, State & Zip		
	941-423-0672 Daytime Telephone number		
ANTHONIZATION BY PHONE T CORRECT AT T	GAVE		
DATE 8/33/99 DOC. EXAM Werry /S	Buch		

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

ARTICLES OF INCORPORATION

TO WELLED OF STATE The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

NAME

The name of the corporation shall be:

Anthony Placek, Inc.

ARTICLE II PRINCIPAL OFFICE

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

5009 Pocatella Avenue North Port, FL 34287

<u>ARTICLE III SHARES </u>

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

1,000

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Anthony Placek 5009 Pocatella Avenue North Port, FL 34287

ARTICLE V INCORPORATOR

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

Anthony Placek 5009 Pocatella Avenue North Port, FL 34287

ARTICLE VI EFFECTIVE DATE

The effective date of this incorporation shall be:

August 9, 1999

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 statues 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.

June 23, 1999 Signature/Registered Agent Date