99 SEP 13 PH 3: 34

CALLAHASSEE, FLORIDA

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

200002985592-016, *****70.00 *****70.00

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 **\$122.50**

S131.25

Filing Fee & Certified Copy Filing Fee, **Certified Copy**

& Certificate

ADDITIONAL COPY REQUIRED

MARNA

2629 Central Aue

322 - 5817

Daytime Telephone number

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

FILED 99 SEP 13 PM 3: 34

ARTICLES OF INCORPORATION

| | LUNE LARY OF STATE |
|---|--|
| The undersigned incorporator, for the purpose of forming a corporation Business Corporation Act, hereby adopts the following Articles of Incorp | i imaer ine irioriaa uhllahassee. Filorioa |
| ARTICLE I NAME The name of the corporation shall be: | |
| Concepts 2000 of st. | Pete., Mc |
| ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation. | ation shall be: |
| 2629 CEntral Ave St Pete FL 3371 | 3 |
| ARTICLE III SHARES The number of shares of stock that this corporation is authorized to | o have outstanding at any one time is: |
| 100 | |
| ARTICLE IV INITIAL REGISTERED AGENT AN | D STREET ADDRESS |
| The name and Florida street address of the initial registered agent | are: |
| MARNA A SCOTT 2629 CENTRAL AU-C ST PETE FL 33713 ARTICLE V INCORPORATOR | |
| ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of In | composition are: |
| | |
| MARNA A SCOTT | |
| 2629 Central Ave st Pete FL 33713. | the state of the s |
| st lete FL 53713 | |
| Maria A Death | 9-9-99 |
| Signature/Incorporator | Date |

(An additional article must be added if an effective date is requested.)

| certificate, I hereby accept the appointment as registered agent provisions of all statutes relating to the proper and complete | process for the above stated corporation at the place designated and agree to act in this capacity. I further agree to comply we performance of my duties, and I am familiar with and access | CALL TALE |
|---|--|-----------|
| obligations of my position as registered agent | | |

Signature/Registered Agent

Date