TRANSMITTAL LETTER

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

600002985046--2 -09/13/39--01084--001 *****70.00 *****70.00

	TEWART, STEWART, & WEAY (Proposed corpor	rate name - must include sul		
\$3 \$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	
FROM:	GABE W. STEWART, II. Name (Pri	I inted or typed)		Orași e li sa creti
	8728 COUNTY ROAD 230	01 (mailing) ddress	P.O. Box 237	
	YOUNGSTOWN, FL 32466 LYNN HAVEN, FL 324 City, State & Zip			32444
	(850) 722-4556 Daytime Te	lephone number	99 SEP 13 PH SECKETARY OF TALLAHASSEE,	

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

SEP 1 7 1999 K. Rolfe

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:

STEWART, STEWART & WEAVER, INC.

PRINCIPAL OFFICE

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

8728 COUNTY ROAD 2301 YOUNGSTOWN, FL 32466

(mailing)

P.O. BOX 237

LYNN HAVEN, FL 32444

ARTICLE III SHARES

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

2,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

GABE W. STEWART, III 8728 COUNTY ROAD 2301

YOUNGSTOWN, FL 32466

(mailing)

P.O. BOX 237

LYNN HAVEN, FL 32444

ARTICLE V INCORPORATOR

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

GABE W. STEWART, III 8728 COUNTY ROAD 2301

YOUNGSTOWN, FL 32466

(mailing)

P.O. BOX 237

LYNN HAVEN, FL 32444

Signature/Incorporator

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

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 and accept the obligations of my pasition as registered agent

Signature/Registered Agent

Date