

P99000083816  
TRANSMITTAL LETTER

September 9, 1999

MISS IBISS INC  
14750 Eden Street, Ft Myers Florida 33908

For first class mail delivery:

DEPARTMENT OF STATE  
Division of Corporations  
Post Office Box 6327  
Tallahassee  
Florida 32314-6327  
(904) 487 - 6052

For overnight delivery:

DEPARTMENT OF STATE  
Division of Corporations  
409 E Gaines Street  
Tallahassee  
Florida 32399  
(904) 487 - 6052

JUDGE PROBATE OFFICE  
PO Box 557  
Brewton  
Alabama 36427

DEPARTMENT OF STATE  
State Capitol  
Austin  
Texas 78711  
(512) 463 5555

SUBJECT: MISS IBISS INC

100002990971--9  
-09/20/99--01077--019  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed are two originals of the Articles of Incorporation and  
check for \$ \$ 78.75 made payable to the State of Florida.

The Registered Agent is Joanne Crawford  
4280 S E 20th Place  
Cape Coral  
Florida 33904

Thank you for your prompt attention to this matter.

FILED  
1999 SEP 20 PM 12: 38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

encl: Check  
2 Original Articles of Incorporation

THE STATE OF FLORIDA  
COUNTY OF LEE

That the undersigned, natural person(s) of the age of at least eighteen (18) years, acting as Incorporator(s) of a Corporation under the Florida Business Corporation Act, do hereby adopt the following Articles of Incorporation for such Corporation, to wit:

The name of this corporation is MISS IBISS INC

### ARTICLE III

I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation.

James Crawford Registered Agent

FILED  
1999 SEP 20 PM 12:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE VII

The number of directors constituting the initial Board of Directors of this corporation is two and the name and address of the person(s) who is to serve as director(s) until the first annual meeting of the shareholders, or until their successors are elected and qualified, is as follows :

NAME	ADDRESS
Kevin John	14570 Eden Street Ft Myers Florida 33908
Mandi John	1112 Panola Dr Warner Robbins GA 31088

The name and address of the incorporator(s) is as follows :

NAME	ADDRESS
Joanne Crawford	4280 S E 20th Place Cape Coral, Florida 33904

WITNESS OUR HANDS this the September 9, 1999

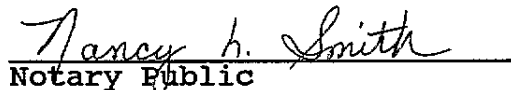
  
Joanne Crawford  
Incorporator

\_\_\_\_\_  
Incorporator

THE STATE OF FLORIDA )  
COUNTY OF WEE )

Before me, the undersigned authority, on this day personally appeared Joanne Crawford, known to me to be the person(s) whose name(s) are subscribed to the foregoing instrument and, being by me first duly sworn severally declares that they are the person(s) who signed the foregoing document as incorporator(s) and that the statements contained therein are true.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this

  
Notary Public

