## P990000 84393

## TRANSMITTAL LETTER

Department of State Division of Corpora P. O. Box 6327 Tallahassee, FL 323	tions		1000029 -09/21/ ****13	9901022-	13 013 **87.50
(Propo	Hayes Enterprise, seed corporate name - mi		pration and a check	9≅ :	ĤED ?
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate  OPY REQUIRED	ADA U	<b>-</b>
EDON	<i>f.</i> 70	. Mill on		·	

FROM:	Roy Miller, CPA			
	Name (Printed or typed)			
	8834-14 Goodby's Executive Dr.			
	Address			
	Jacksonville, FL 32217			
	City, State & Zip			
	(904)731-4846			
·	Daytime Telephone number			

F. CHIESSEN SEP 2 3 1999

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 NAME

The name of the corporation shall be:

Mary Hayes Enterprise, Inc.

ARTICLE II PRINCIPAL OFFICE

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

2716 Adele Rd Jacksonville, FL 32216

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Mary Hayes 2716 Adele Ro Jacksonville, FL 32216

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Mary Hayes 2716 Adele Rd Jacksonville, FL 32216

Signature/Incorporator/

Dota

(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 position as registered agent

Signature/Registered Agent

9-15-99

Date