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

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SUBJECT:	Peace River Vall	ey Monument Co.			
	(Proposed corpor	ate name - must include suf	TÄLLAHASSEL	99 OCT -6 PM 9	刊日
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	XI\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	F STATE FLORIDA	1
FROM:	Thomas M. Robart Name (Pr	inted or typed)			
	P.O. Box 14 99	address			,
		4265State & Zip	<u></u>		·
	(863)494-7646 Davtime To	elephone number			

F. CHIESERA OCT 7 1999 ony of the articles.

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.

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The name of the corporation shall be:

Peace River Valley Monument Co.

ARTICLE II PRINCIPAL OFFICE

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

163 N. Brevard Ave.

P.O. Box 14**49** Arcadia, FL 34265

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Thomas M. Robarts 5448 Wilkinson Rd. Sarasotga, FL 34233

ARTICLE V INCORPORATOR

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

Thomas M. Robarts 5448 Wilkinson Rd. Sarasota, FL 34233

Signature/Incorporator

Date

(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

Date