

P99000095850

FRANK C. AMATEA

LAWYER

(352) 732-4740
FAX (352) 867-5111

October 15, 1999

500 N. E. EIGHTH AVENUE
OCALA, FLORIDA 34470

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*****70.00 *****70.00

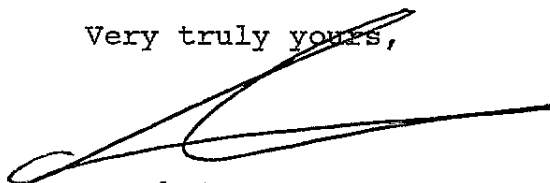
Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

RE: Liles Co., Inc.

Gentlemen:

Enclosed please find original and copy of Articles of Incorporation for the subject corporation together with my check for \$70.00 representing the filing fee and registered agent fee. We do not need a certified copy of the Articles of Incorporation.

Very truly yours,



Frank C. Amatea

FCA:ejm
Enclosures

cc: Mr. Eugene Liles

FILED
99 NOV -1 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W99-24306

1

K. Rolfe

NOV 01 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

October 21, 1999

FRANK C. AMATEA, ESQ
500 NE EIGHTH AVENUE
OCALA, FL 34470

SUBJECT: LILES CO., INC.
Ref. Number: W99000024306

We have received your document for LILES CO., INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6924.

Kimberly Rolfe
Corporate Specialist Supervisor

Letter Number: 899A00050788

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ARTICLES OF INCORPORATION
OF
LILESCO, INC.

FILED
99 NOV -1 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as incorporator of a corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation for such corporation.

ARTICLE I. NAME

The name of the corporation is:

LILESCO, INC.

ARTICLE II. PRINCIPAL OFFICE

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

4380 NE 36th Avenue
Ocala, FL 34479

ARTICLE III. CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 500 shares.

ARTICLE IV. INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Eugene T. Liles
4380 NE 36th Avenue
Ocala, FL 34479

ARTICLE V. INCORPORATOR

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

Eugene T. Liles
4380 NE 36th Avenue
Ocala, FL 34479

ARTICLE VI. DURATION

The period of duration of the corporation is perpetual.

ARTICLE VII. PURPOSE

The purpose or purposes for which the corporation is organized are to engage in any activity or business permitted under the laws of the United States and of Florida.

The undersigned has executed these Articles of Incorporation this 27 day of October, 1999.


Eugene T. Liles

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent in the State of Florida

1. The name of the corporation is:

LILESCO, INC.

2. The name and address of the registered agent and office is:

Eugene T. Liles
4380 NE 36th Avenue
Ocala, FL 34479

SIGNATURE: _____

Eugene T. Liles

TITLE: Incorporator

DATE: October 27, 1999

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: _____

Eugene T. Liles

DATE: October 27, 1999

FILED
99 NOV - 1 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA