## TRANSMITTAL LETTER

# P9900096992

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

SUBJECT:	ReSure Associates, Inc.  (Proposed corporate name - must include suffix)  11.1.2.1.2.2.3.3.2.3.5.0				
	EFFETTIVE LIFTER (Froposed Corpor		DOOO3032: -11/02/980 *****78.75	950- 1062 *****	 003 78. 7
Enclosed is an origin	al and one(1) copy of the article	es of incorporation and a	check for:	•	
\$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		
		ADDITIONAL	27 C	99	
FROM	: H. Clay Lowry	SECUL SECULATION SECULATION OF THE SECURATION OF THE SECULATION OF			77
	36 W. Illiana Street	Address	SEE, FLOR	2 AM 8:57	FILED
	Orlando, FL 32806	State & Zip	A A	7 57	
DOUBLA GAVETO	(40=) 200 4000	elephone number			
E EXAM					

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

ARTICLES	OF	<b>INCORPOR</b>	RATION

EFFECTIVE DATE

The undersigned incorporator, for the purpose of forming a corpbration under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

ReSure Associates, Inc.

# ARTICLE II PRINCIPAL OFFICE

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

36 W. Illiana Street Orlando, FL 32806

### ARTICLE III SHARES

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

500

## ARTICLE IV' INITIAL REGISTERED AGENT AND STREET ADDRESS

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

H. Clay Lowry

36 W. Illiana Street

Orlando, FL 32806

## ARTICLE V INCORPORATOR

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

H. CLAY LOWRY 36 W ILLIANA STREET ORLANDO FL 32806

#### ARTICLE VI EFFECTIVE DATE

The starting date of this corporation shall be November 1, 1999.

Signature/Incorporator

H. Clay Lowry

(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

H. Clay Lowry

99 NOV -2 AM 8: 57
SECILERARY DESTATE
TALLARIASSEE, FLORIDA