Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 (Proposed corporate name - must include suffix) 200003054322 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$122.50 \$131.25 **\$78.75** \$70.00 Filing Fee Filing Fee, Filing Fee Filing Fee & Certified Copy **Certified Copy** & Certificate & Certificate ADDITIONAL COPY REQUIRED Name (Printed or typed)

TRANSMITTAL LETTER

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

121.00

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be:

PRINCIPAL OFFICE ARTICLE II

Trivara TEAL ESTATE THURSTON TRUSS, INC.

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

18455 S.W. 84 Cours 7,000, Florios 33157

ARTICLE III SHARES

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

Me THOUSAND

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and address of the initial registered agent is:

() COEN S. GREEN STURNT, FL. 34997

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

JOSENT F. McNoss 18455 Su 84 Cour Mon, KL. 33157

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
19 day of November , 1989
An additional article must be added if an effective date is requested.)
N Q. McZen
Signature
Signature
Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF 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 corpor	ation is Musica Sanc Listan Investigation
The name of the confer	Trust, Lie.
2. The name and address of	of the registered agent and office is:
	ROGEN B. GREEN
·	(Name)
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)
· ·	Course II Ducat

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.

(DATE) (DATE)