TRANSMITTAL LETTER

P9900106981 rations

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

SUBJECT: H.E.I.R.S., INC. (Proposed corporate name - must include suffix)						
		91		1 066 1/390 187.50	1055	98 017 **87.50
Enclosed is an origina	al and one(1) copy of the articles	s 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	S \$87.50 Filing For Certified & Certified Status PY REQUI	ee, I Copy Icate of		
FROM:	Darryl Anthony Marshall	Sr.				
	118 Deerwood Circle A Quincy, Florida 32351	inted or typed) Address State & Zip		SECRETARY OF STATE TALLAHASSEE, FLORIDA	99 DEC 10 PM 1:12	APPROVED FALED
		elephone number				77 FF 1 1 14

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:

H.E.I.R.S., INC.

ARTICLE II PRINCIPAL OFFICE

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

H.E.I.R.S., INC. 118 Deerwood Circle Quincy, Florida 32351

ARTICLE III SHARES

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

Two (2)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Darryl Anthony Marshall Sr. 118 Deerwood Circle Quincy, Florida 32351

ARTICLE V INCORPORATOR

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

Darryl Anthony Marshall Sr. 118 Deerwood Circle Quincy, Florida 32351

12/10/99

(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

Signature/Incorporator

Date