## STATE OF SOUTH CAROLINA **SECRETARY OF STATE**

## **ARTICLES OF INCORPORATION**

١.	The	name of the proposed corporation is:				
)	L	initial registered office of the corporation is:				
	me	initial registered office of the corporation is.				
	(Stree	et Address)				
	(City, State, Zip Code)					
	And	the initial registered agent at such address is:				
	(Nam	ame)				
I hereby consent to the appointment as registered agent of the corporation						
	(Ager	nt's Signature)				
3. The corporation is authorized to issue shares of stock as follows. Complete "a" or "b", whichever is applica						
a.						
		shares authorized is				
	b.	The corporation is authorized to issue more than one class of shares:				
		Class of Shares Authorized Number of Each Class				
		The relative right, preference, and limitations of the shares of each class, and of each series within a class, are as follows:				
		<u> </u>				
ŀ.	The	existence of the corporation shall begin as of the filing date with the Secretary of State unless a delayed date is				
	indic	ated (see Section 33-1-230(b) of the 1976 South Carolina Code of Laws, as amended) of its incorporation is				

<u> </u>	Name of Corporation			
The optional provisions, which the corporation elects to include in the articles of incorporation, are as applicable provisions Sections 33-2-102, 35-2-105, and 35-2-221 of the 1976 South Carolina Code (amended).				
The name, address and signature of each incorporator is as follows (only one incorporator is required): a.				
(Name)				
(Address)				
(City, State, Zip Code)				
(Signature)				
b.				
(Name)				
(Address)				
(City, State, Zip Code)				
(Signature)				
c.				
(Name)				
(Address)				
(City, State, Zip Code)				
(Signature)				

		Name of Corporation
7. I, state of South Carolina, certify that the corporation, to complied with the requirements of Chapter 2, Title 33 of to the articles of incorporation.	whose articles of incorporation this certifica-	ate is attached, has
Date:		
Name of Corporation:		
Signature		
Type or Print Name		
(Street Address)		
(City, State, Zip Code)		
(Telephone Number)	· · · · · · · · · · · · · · · · · · ·	

## **FILING INSTRUCTIONS**

- 1. Two copies of this form, the original and either a duplicate original or a conformed copy, must be filed.
- 2. If the space in this form is insufficient, please attach additional sheets containing a reference to the appropriate paragraph in this form.
- Enclose the fee of \$135.00 payable to the Secretary of State. The \$25 CL-1 fee is included in the \$135 filing fee. 3.
- THIS FORM MUST BE ACCOMPANIED BY THE FIRST REPORT TO CORPORATIONS (SEE SECTION 12-20-20 4. OF THE 1976 SOUTH CAROLINA CODE OF LAWS, AS AMENDED). The \$25 CL-1 fee is included in the \$135 filing fee.

Return to: Secretary of State

1205 Pendleton Street, Suite 525

Columbia, SC 29201

SPECIAL NOTE

THE FILING OF THIS DOCUMENT DOES NOT, IN AND OF ITSELF, PROVIDE AN EXCLUSIVE RIGHT TO USE THIS CORPORATE NAME ON OR IN CONNECTION WITH ANY PRODUCT OR SERVICE. USE OF A NAME AS A TRADEMARK OR SERVICE MARK WILL REQUIRE FURTHER CLEARANCE AND REGISTRATION AND BE AFFECTED BY PRIOR USE OF THE MARK. FOR MORE INFORMATION, CONTACT THE TRADEMARKS DIVISION OF THE SECRETARY OF STATE'S OFFICE.