DATE FIN 59-3715759 546-5' Corp.

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

Re: William L	. Leaptrot , Inc.
(BPI)	900044328 79 -06/20/010108001 *****78.75 *****78
Gentlemen:	
Enclosed please find the original and one copy of check in the amount of \$78.75	f the Articles of Incorporation, together with my
This represents the cost of the Filing Fees, Certific Registered Agent Designation for the above name	A TANK AND
Ver	y truly yours.
	William L Leaptist (Individual's Name)
	William L. Leaptrot, Inc. (Name of Corporation)
	MAILING ADDRESS OF CORPORATION
	P.O. Box 1869
	Inverness, FL. 34451
	PHONE -
	(352) 726-0384

Area Code

ARTICLES OF INCORPORATION

of

William L. Leaptrot, Inc.

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

The name of the corporation is: William L. Leaptrot, Inc. ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law. ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue _____500___shares of common stock, par value \$ ____1.00____ per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET AL	DDRESS	<u></u> -	
	8600 NE 147th Avenue Ro	oad	
CITY	Silver Springs	FLORIDA	ZIP 34488
Mailing	g address, if different		

STREET A	DDRESS		
	P.O. Box 1869		
CITY	Tnverness	_ FLORIDA	ZIP 24451

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	William L. Leaptrot		
ADDRESS	8600 NE 147th Avenue	Road	
CITY	Silver Springs	- FLORIDA	ZIP 34488

either increas	rporation shall have1 (aws, but shall r	ctors initially. The never be less than o		
NAME	William L. Leaptrot		· · · · · · · · · · · · · · · · · · ·		
ADDRESS	8600 NE 147th Avenue Road	·	_		
CITY	Silver Springs	STATE	Florida	ZIP	34488
NAME				•	_
ADDRESS		***			
CITY		STATE		ZIP	
NAME					
ADDRESS					
CITY The names ar	ARTICLE VIII and addresses of the incorporators signing these A			ZIP ows:	
The names an	ARTICLE VIII and addresses of the incorporators signing these A	- INCORPORA			
The names an	ARTICLE VIII and addresses of the incorporators signing these A William L. Leaptrot	- INCORPORA			
The names and NAME ADDRESS	ARTICLE VIII and addresses of the incorporators signing these A William L. Leaptrot 8600 NE 147th Avenue Road	- INCORPORA	poration are as follo	ows:	
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(Signature)

(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

William L. Leaptrot, Inc.	SECRETARY OF ST	01 JUN 20 PM 3:	
(name of corporation)	RIDA ATE	07	

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at	8600 NE 147th Avenue Ro	ad
	Silver Springs, FL. 3	4488
has named	William L. Leaptrot	

located at the aforesaid address, as its registered agent to accept service of process within this state.

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.

William I Leapthot
(Signature)

 $\frac{\mathcal{U}(f, \mathcal{V})}{\text{(Date)}}$