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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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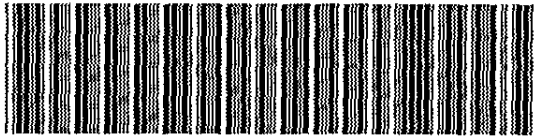
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA



MICHAEL J. COOPER  
ATTORNEY AT LAW

321 N.W. 3RD AVENUE • OCALA, FLORIDA 34475 • TELEPHONE 352-732-4500 • FAX 352-351-3859

October 28, 2002

Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

RE: ***Mountain Management and Consulting Company***

Dear Sirs:

Please find enclosed the original and one copy of the proposed Charter for the above referenced corporation (including designation of Resident Agent) together with a check payable to your order in the amount of \$78.75 to cover the following:

Filing fee for Charter	\$ 35.00
Certified copy of Charter	8.75
Filing fee for Certificate of Registered Agent	35.00
<b>TOTAL:</b>	<b>\$ 78.75</b>

Please return the certified copy of the Charter to me.

Thank you for your cooperation in this matter.

Sincerely yours

Michael J. Cooper

MJC/slw

Enclosures

xc: Ms. Mary Verrando-Higgins

**ARTICLES OF INCORPORATION  
OF  
MOUNTAIN MANAGEMENT AND CONSULTING COMPANY**

The undersigned, for the purposes of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE I - NAME**

The name of the corporation is Mountain Management and Consulting Company with a principal office and mailing address of .

**ARTICLE II - COMMENCEMENT AND DURATION**

The duration of the corporation is perpetual. The date and time of the commencement of corporate existence is the time of filing of the Articles of Incorporation by the Department of State of the State of Florida.

**ARTICLE III - PURPOSE**

The general purposes for which the corporation is organized are to transact any lawful business for which corporations may be incorporated under the Florida General Corporation Act.

**ARTICLE IV - CAPITAL STOCK**

The aggregate number of shares which the corporation is authorized to issue is Seven Thousand Five Hundred (7,500) shares. Such shares shall be of a single class and shall have a par value of One Dollar (\$1.00) per share.

**ARTICLE V - REGISTERED OFFICE**

The street address of the initial principal office and registered office of the corporation is: 1920 SW 12th Avenue, Ocala, FL 34474. The name of its initial Registered Agent is MARY VERRANDO-HIGGINS.

**ARTICLE VI - INITIAL BOARD OF DIRECTORS**

The corporation shall have one (1) director(s) initially. The number of directors may be either increased or diminished from time to time by the By-Laws. The name and address of the initial director(s) is/are:

**MARY VERRANDO-HIGGINS, 1920 SW 12th Avenue, Ocala, FL 34474**

**ARTICLE VII - INCORPORATOR**

The name and address of the incorporator is:

**MARY VERRANDO-HIGGINS, 1920 SW 12th Avenue, Ocala, FL 34474**

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TALLAHASSEE, FLORIDA

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ARTICLE VIII

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This corporation is a small business corporation within the meaning of Section 1244 of the Internal Revenue Code and as soon as is practicable this corporation shall adopt a Section 1244 offering plan.

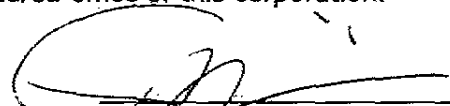
ARTICLE IX - PRE-EMPTIVE RIGHTS

The shareholder(s) may adopt, by written agreement, a plan providing for pre-emptive rights as to the issuance, sale or transfer of any stock. If such agreement exists there shall be printed on the face of all stock in a legible manner proper words to notify any holder, buyer or transferee thereof of such agreement.

EXECUTED by the undersigned person at Ocala, Marion County, Florida, on this the 31<sup>st</sup> day of October, 2002.

  
\_\_\_\_\_  
MARY VERRANDO-HIGGINS  
Incorporator


I, MARY VERRANDO-HIGGINS, accept the office of Registered Agent. I am located at 1920 SW 12th Avenue, Ocala, FL 34474 the registered office of this corporation.

  
\_\_\_\_\_  
MARY VERRANDO-HIGGINS  
Registered Agent

STATE OF FLORIDA  
COUNTY OF MARION

The foregoing instrument was acknowledged before me this 31<sup>st</sup> day of October, 2002 by MARY VERRANDO-HIGGINS, as Incorporator and MARY VERRANDO-HIGGINS, as Registered Agent, who:

- A)  is/are personally known to me OR  
 who has/have produced a driver's license OR  
 other identification:
- B)  I did OR  did not take an oath.

  
\_\_\_\_\_  
Signature of Notary Public  
Print Name: ROBIN R. WHITE

AFFIX SEAL/EXPIRATION DATE:

