

P95000015758

TRANSMITTAL LETTER

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

200001415392
-02/24/95--01116--013
*****78.75 *****78.75

SUBJECT: CDC Associates, Inc.
(Proposed corporate name - must include suffix)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 24 AM 9:25

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: John M Doyle
Name (printed or typed)

1611 Grandview Drive
Address

Tarpon Springs, FL 34689
City, State & Zip

(813) 942-1052
Daytime Telephone number

KAN 2-27

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

ARTICLES OF INCORPORATION

95 FEB 24 AM 9:25

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 NAME

The name of the corporation shall be:

CDC Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1611 Grandview Drive
Tarpon Springs, FL 34689

ARTICLE III SHARES

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

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

John Doyle
1611 Grandview Drive
Tarpon Springs, FL. 34689

ARTICLE V INCORPORATOR(S)

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

President
Sally A Doyle 1611 Grandview Drive Tarpon Springs, FL 34689

John Doyle 1611 Grandview Drive Tarpon Springs, FL 34689

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

20th day of February, 1995.

Sally A Doyle
Signature

John Doyle
Signature

Signature

Articles of Incorporation
Filing Fee - \$35

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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 corporation is: L.D.C. Associates, Inc.

2. The name and address of the registered agent and office is:

John Doyle
(Name)

1611 Grandview Drive
(P.O. Box not acceptable)

Tarpon Springs, FL 34689
(City/State/Zip)

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.

John Doyle
(Signature)

2/20/95
(Date)