

P960000 13411
TRANSMITTAL LETTER

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

SUBJECT: GEORGE T. MACCONNELL, P.A. (Professional Association)
(Proposed corporate name - must include suffix)

200001695312
-01/23/96--01004--004
*****78.75 *****78.75

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

Additional Copy Required

FROM: George T. MacConnell, Esquire
Name (printed or typed)
513 W. Central Avenue
Address
Winter Haven, FL 33880
City, State & Zip
(941) 297-7024
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

96 FEB 13 PM 11:25

FILED

GAVE

AUTHORIZATION BY PHONE TO

CORRECT _____

DATE _____

DOC. EXAM _____

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

1891-06-1981
25.00



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

January 26, 1996

GEORGE T. MACCONNELL, ESQUIRE
513 W. CENTRAL STREET
WINTER HAVEN, FL 33880

SUBJECT: GEORGE T. MACCONNELL, P.A.
Ref. Number: W96000001981

We have received your document for GEORGE T. MACCONNELL, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6933.

Dana Farmer
Document Specialist

Letter Number: 896A00003454

ARTICLES OF INCORPORATION

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 for the State of Florida.

FILED
96 FEB 13 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The Name of the corporation shall be:

George T. MacConnell, P.A.

ARTICLE II PRINCIPAL OFFICE

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

513 W. Central Avenue
Winter Haven, FL 33880

ARTICLE III SHARES

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

5,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

George T. MacConnell, Esquire
513 W. Central Avenue
Winter Haven, FL 33880

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

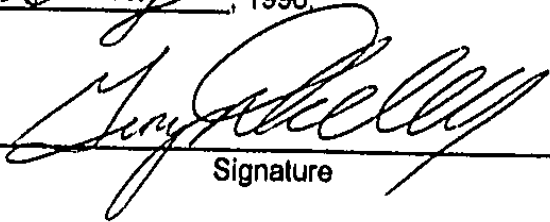
George T. MacConnell, Esquire
513 W. Central Avenue
Winter Haven, FL 33880

ARTICLE VI NATURE OF BUSINESS

Law and Accounting practice

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

6th day of February, 1996.



Signature

Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

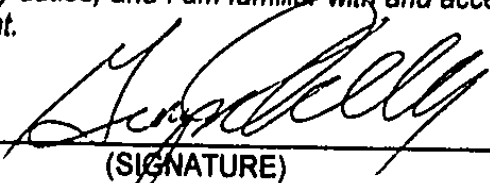
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: George T. MacConnell, P.A.
2. The name and address of the registered agent and office is:

George T. MacConnell, Esquire
513 W. Central Avenue
Winter Haven, FL 33880

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)

2/6/96

(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL
32314

FILED
96 FEB 13 PM 11:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA