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EQUILEASE, INC. 4300 NW 23RD AVE., #520 GAINESVILLE, FL 32606 (352) 377-7223

May 1, 1998

Division of Corporations Department of State 409 E Gaines St. Tallahassee, FL 32309

Gentlemen:

Enclosed are the Articles of Incorporation for EQUILEASE AT CREEKSIDE, INC., together with a check in the amount of \$122.50 to cover the following filing fees:

TOTAL	\$122.50	•
Certification	52.50	2000025099720 -05/04/9801100009 ****122.50 ****122.50
Registered Agent Certificate	_ 35.00	
Corporation filing fee	\$35.00	

Thank you for your prompt attention to this filing.

Very truly yours,

aine B. Murphy

(352) 377-7099

n 5/7/9x

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I. NAME

The name of the corporation shall be: **EQUILEASE AT CREEKSIDE, INC.**

ARTICLE II. PRINCIPLE OFFICE

The principal place of business of the corporation is 3501 SW 2nd Avenue, Gainesville, FL 32607. The mailing address of this corporation shall be 4300 NW 23rd Avenue, Suite 520, Gainesville, FL 32606.

ARTICLE III. SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 500 shares of common stock having \$1.00 par value per share.

ARTICLE IV. INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent is: Lorraine B. Murphy, 5307 NW 91st Blvd., Gainesville, FL 32653.

ARTICLE V. INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is: Lorraine B. Murphy, 5307 NW 91st Blvd., Gainesville, FL 32653

$\mathcal{A}_{\mathcal{A}}$	5/1/98
Signature/Incorporator	Date

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/Registered Agent

Date Date AHASSEE, FLOR