

TRANSMITTAL LETTER

PG9000109682

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

SUBJECT: Atmco Management Group, Inc.
(Proposed corporate name - must include suffix)

FILED
99 DEC 17 AM 9:46
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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 of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: James P. Heinzelman, Sr.
Name (Printed or typed)

PO Box 608164
Address

Orlando FL 32860-8164
City, State & Zip

407.578.5006
Daytime Telephone number

000003074350--4
-12/17/99-01084-006
****70.00 ****70.00

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

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:

Armco Management Group, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Building E
6239 Edgewater Drive
Orlando FL 32810

P. O. Box 608164
Orlando FL 32860-8164

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ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

James P. Heinzelman, Sr.
Building E
6239 Edgewater Drive
Orlando FL 32810

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

James P. Heinzelman, Sr.
Building E
6239 Edgewater Drive
Orlando FL 32810


Signature/Incorporator

12-16-99
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

12-16-99
Date