P95000038835

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314

FILED

95 MAY 15 PH 3:48

SECRETARY
TALLAMASSES, FLORIDA

\$700000004 4 7 1 4 225 -05/02/95--0101--006 +++++78.75 +++++78.75

SUBJECT: CMnc Inc.
(Proposed corporate name- must include suffix)

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

\$70.00 \$78.75 \$122.50 \$131.25

Filing Fee Filing Fee Filing Fee Filing Fee & Certificate & Certified Copy Cert.Copy

Certificate

DICTION BY PHONE TO POBOX 184

AUTHORIZATION BY PHONE TO POBOX 184

Address

CORRECT. R.A. Gidelian Day City, State & Zip

DATE City, State & Zip

DOC. EXAM. C.C. (904) 584-3536

Daytime Telephone number

NO5 9534



May 5, 1995

DIANE H MILLER P.O. BOX 184 PERRY, FL 32347

SUBJECT: CMAC INC.

Ref. Number: W95000009534

We have received your document for CMAC INC, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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) 487-6973.

AMANDA HERRING Document Specialist

Letter Number: 795A00022057



ARTICLE 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.

ARTICLE I NAME

The name of the corporation shall be:

CMAC ENTERPRISE CORP.

ARTICLE II PRINCIPAL OFFICE

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

P O Box 18% O'Steen RD, Perry, F1, 32347

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 address of the initial registered agent is:

DIANE H MILLER P O BOX 184 O'Steen Rd. Perry fl. 32347

ARTICLE V INCORPORATOR(S)

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

DIANE H MILLER P O BOX 184 O'Steen RD. Perry, F1 32347

CHARLES A MILLER JR P O Box 184 O'Steen RD Perry, F1 32347

MARY VIRGINIA SESSIONS P O Box 1058 O'Steen Rd. Perry, F1 32347

MACK D SESSIONS P O Box 1058 O'Steen RD Perry, F1 32347

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 30 day of APRIL 19 95.

Signature

Signature

Signature

10

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: Cmac Enterprise C	SECRETAL SECRETARIAN SECRETARI	HH 28	7
		(i)	<u>.u</u>	173
		; ; <u>22.</u>		Ö
2.	The name and address of the registered agent and o	C.3.	37 45	
	DIANE H MILLER		_	
	(Name)	_ -		
	O'Steen RD P O Box 184			
	(P). Box not acceptable)	-		
	Per. v., f1. 32347			
	City/State/Zip	- Control of the Cont		

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.

Diane N. Müller 4-30-95
Signature of Registered Agent Date