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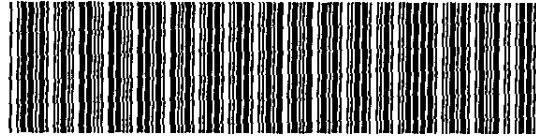
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STATE OF TEXAS  
SECRETARY OF STATE

B. McKnight APR 25 2005

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT: NORTH PORT COMMUNITY EMERGENCY RESPONSE TEAM, INC.**

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Jonathan E. Hausburg, Esq.**  
3202 N. Tamiami Trail  
Sarasota, Fl 34234

For further information concerning this matter, please call:

**Jonathan E. Hausburg**

**941-351-9111**

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**NOT FOR PROFIT  
ARTICLES OF INCORPORATION  
OF  
NORTH PORT COMMUNITY  
EMERGENCY RESPONSE TEAM, INC.**

05 APR 21 PM 3:32

EMERGENCY RESPONSE TEAM, INC.  
NORTH PORT, FLORIDA

**ARTICLE I. CORPORATE NAME**

The name of this corporation is **NORTH PORT COMMUNITY EMERGENCY RESPONSE TEAM, INC.**

**ARTICLE II. PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation are 2717 Begonia Terrace, North Port, Florida 34286.

**ARTICLE III. PURPOSE**

The specific purpose of this corporation shall be to provide auxiliary search and rescue assistance to various emergency management agencies as needed such as North Port Fire Department, Florida Department of Emergency Management, and the Federal Emergency Management Agency. Members also may perform search and rescue or offer medical assistance in areas other than the City of North Port, Florida.

**ARTICLE IV. ELECTION OR APPOINTMENT OF DIRECTORS**

The Directors are elected or appointed on an annual basis.

**ARTICLE V. DIRECTORS/OFFICERS**

The names and addresses of the Directors/Officers of the corporation are:

President/Director: Michael Jennings, 2717 Begonia Terrace, North Port, FL 34286

Secretary/Director: Arthur Pier, 4005 Holin Lane, North Port, FL 34287

Director: John Barkenquast, 3655 Albin Avenue, North Port, FL 34286

**ARTICLE VI. INITIAL REGISTERED AGENT AND OFFICE**

The name and address of the initial registered agent is Michael Jennings, 2717 Begonia Terrace, North Port, FL 34286.

**ARTICLE VII. INCORPORATOR**

The name and street address of the incorporator of these articles of incorporation is Michael Jennings, 2717 Begonia Terrace, North Port, FL 34286.

The undersigned has executed these articles of incorporation on April 8, 2005.

Michael Jennings  
**MICHAEL JENNINGS**, Incorporator

I hereby am familiar with and accept the duties and responsibilities of Registered Agent.

Michael Jennings  
**MICHAEL JENNINGS**, Registered Agent

05 APR 21 PM 3:32  
STATE OF FLORIDA  
DEPARTMENT OF REVENUE