

Department of State Division of Corporations P. 0. Box 6327 Tallahassee, FL 32314

SUBJECT: Partnersfirst Management Resources, Inc.

(Proposed corporate name - must include suffix)

000003132060--9 -02/11/00--01010--008 *****87.50 *****87.50

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

LJ \$70.00 Filing Fee

GAVE

LI \$78.75

Filing Fee

& Certificate of Status

LJ\$78.75

Filing Fee

& Certified Copy

XX \$87.50 Filing Fee,

Certified Copy & Certificate of

Status

ADDITIONAL COPY

REQUIRED

From:

Walter Hall

P.O. Box 200

Windermere, FL 34786

(407) 876-0987

Daytime Telephone number

119/

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose offorining 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: Partnersfirst Management Resources, Inc.

ARTICLE II PRINCIPAL OFFICE

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

2574 Carter Grove Circle

Mailing Address:

P.O. Box 200

Windermere, FL 34786

Windermere, FL 34786

ARTICLE III SHARES

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

1,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Walter Hall

2574 Carter Grove Cir.

Windermere, Fl. 34786

<u>ARTICLE V</u>

INCORPORATOR

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

Walter Hall

P.O. Box 200

Windermere, FL 34786

Date: Februar

Signature

Incorporator/Registered Agent

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service ofprocess for the above stated corporation at the place 'designated in this ceilificate, I hereby accept the appointment as registered agent and agree to act in this capacity. Ifurther 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