

P00000016341

FEBRUARY 8, 2000

Office of the Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Dear Sir:

200003132042--5
-02/11/00--01010--004
*****87.50 *****87.50

Re: CHARLES F. WORSHAM CO.

Enclosed please find the original and one copy of the Articles of Incorporation, which includes the designation of registered agent, together with my check in the amount of \$87.50 for filing same.

Thank you for your usual prompt attention to these matters.

Please return letter of acknowledgment to

CHARLES F. WORSHAM

2719 ROBIN RD.

JACKSONVILLE, FL. 32216

904-691-3673

Charles F. Worsham

CHARLES F. WORSHAM

Enclosures

Charles F. Worsham GAVE
AUTHORIZATION BY PHONE TO
CORRECT CORP. SUFFIC
DATE 2-16-00
DOC. EXAM MC

Form 3

FILED
00 FEB 11 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FL 32312

2-16
MC

ARTICLES OF INCORPORATION
OF

CHARLES F. WORSHAM CO.

FILED
00 FEB 11 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as the incorporator of a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation for such corporation:

ARTICLE I

NAME: The name of the Corporation is: CHARLES F. WORSHAM CO.

ARTICLE II

REGISTERED OFFICE AND REGISTERED AGENT: The street address of the initial registered office is:

2719 ROBIN RD., JACKSONVILLE, FL. 32216

and the name of the initial registered agent is:

CHARLES F. WORSHAM

ARTICLE III

DURATION: The Corporation shall have perpetual existence.

ARTICLE IV

PURPOSE: The purpose of the Corporation is to engage in any lawful act or activity for which corporations may be now or hereafter organized under the laws of the State of Florida.

ARTICLE V

CAPITAL STOCK: The Corporation is authorized to issue only one class of stock. The total number of shares authorized shall be 1000 and the par value of each share is \$1.00.

ARTICLE VI

BOARD OF DIRECTORS: The initial board of director(s) shall consist of _____ member. The name and mailing address of the person who is to serve as director.

Name: CHARLES F. WORSHAM

Address: 2719 ROBIN RD., JACKSONVILLE, FL. 32216

ARTICLE VII

INCORPORATOR: The name and address of the incorporator is:

The undersigned being the sole incorporator above named signs and acknowledges these Articles of Incorporation at JACKSONVILLE, FL., Florida on the 8th day of FEBRUARY, 2000.

Charles F. Worsham

Incorporator (Signature)

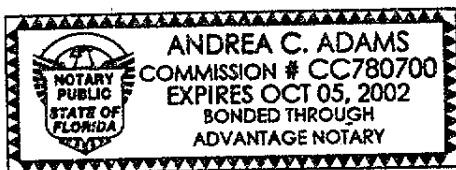
CHARLES F. WORSHAM

STATE OF FLORIDA
COUNTY OF DUVAL

Before me, the undersigned authority, personally appeared CHARLES F. WORSHAM

Who is to me well known to be the person described in and who subscribed the above Articles of Incorporation, and he did freely and voluntarily acknowledge before me according to law that he made and subscribed the same for the uses and purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and my official seal, at _____ in said County and State this 8th day of February, 2000.



Andrea C. Adams

Notary Public
STATE OF FLORIDA

My commission expires: 10/5/02

APPOINTMENT OF REGISTERED AGENT

FILED
00 FEB 11 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

In compliance with Section 48.091, Florida Statutes, the following is submitted:

First - That CHARLES F. WORSHAM CO.

desiring to organize or qualify under the laws of the state of Florida, with its principal place of business at city of JACKSONVILLE.

state of FLORIDA, has named CHARLES F. WORSHAM,

located at 2719 ROBIN RD.,

city of JACKSONVILLE, state of Florida, as its agent to

accept service of process within Florida.

Signature Charles F. Worsham
(Corporate Officer)
CHARLES F. WORSHAM

Title DIRECTOR

Date FEBRUARY 8, 2000

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Signature Charles F. Worsham
(Resident Agent)
CHARLES F. WORSHAM

Date FEBRUARY 8, 2000