

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

PO0000026569

Island Business Corporation

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| <input checked="" type="checkbox"/> | Art of Inc. File | <i>Photo</i> |
| <input type="checkbox"/> | LTD Partnership File | |
| <input type="checkbox"/> | Foreign Corp. File | |
| <input type="checkbox"/> | L.C. File | |
| <input type="checkbox"/> | Fictitious Name File | |
| <input type="checkbox"/> | Trade/Service Mark | |
| <input type="checkbox"/> | Merger File | |
| <input type="checkbox"/> | Art. of Amend. File | |
| <input type="checkbox"/> | RA Resignation | |
| <input type="checkbox"/> | Dissolution / Withdrawal | |
| <input type="checkbox"/> | Annual Report / Reinstatement | |
| <input checked="" type="checkbox"/> | Cert. Copy | |
| <input checked="" type="checkbox"/> | Photo Copy | |
| <input type="checkbox"/> | Certificate of Good Standing | |
| <input type="checkbox"/> | Certificate of Status | |
| <input type="checkbox"/> | Certificate of Fictitious Name | |
| <input type="checkbox"/> | Corp Record Search | |
| <input type="checkbox"/> | Officer Search | |
| <input type="checkbox"/> | Fictitious Search | |
| <input type="checkbox"/> | Fictitious Owner Search | |
| <input type="checkbox"/> | Vehicle Search | |
| <input type="checkbox"/> | Driving Record | |
| <input type="checkbox"/> | UCC 1 or 3 File | |
| <input type="checkbox"/> | UCC 11 Search | |
| <input type="checkbox"/> | UCC 11 Retrieval | |
| <input type="checkbox"/> | Courier | |

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

LM 3/15 1:22

RECEIVED
MAR 15 PM 2:30
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
DEPARTMENT OF REVENUE
00 MAR 15 PM 3:22
FILED

ARTICLES OF INCORPORATION

OF

Island Business Corporation

FILED
00 MAR 15 PM 3:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 is **Island Business Corporation**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is **12165 Metro Parkway, Suite 28, Fort Myers, FL 33912.**

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one-hundred (100) shares having a par value of one dollar (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Michael F. Kayusa, Esq., 1922 Victoria Avenue, Suite A, Fort Myers, FL 33901.**

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of the initial Board of Directors of the corporation is **President, Vice President, Secretary, Treasurer, David A. Plonski, 12165 Metro Parkway, Suite 28, Fort Myers, FL 33912.**

The undersigned has executed these Articles of Incorporation this 15th day of March 2000.

"Capital Connection, Inc. by, Lance L. McGee, Client Representative"

Lance L. McGee

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

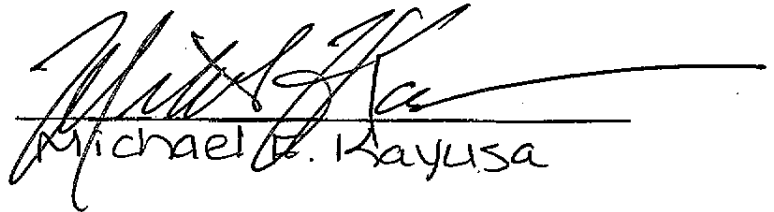
Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: Island Business Corporation

2. The name and street address of the registered agent and office is: _____

Michael F. Kayusa, Esq.
1922 Victoria Avenue, Suite A
Ft. Myers, FL 33901

HAVE 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.


Michael F. Kayusa

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA