CAPITAL CONNECTION, INC.

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

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	Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Officer Search Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search
Requested by: Date Walk-In Will Pick Up	Fictitious Owner Search Vehicle Search Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval Courier Courier

ARTICLES OF INCORPORATION OF

KURT A. WYLAND, P.A.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby adopts the following Articles of Incorporation for the purpose of forming a professional corporation under the provisions of Chapter 607 and 621, Florida Statutes, and pursuant to the following Articles of Incorporation:

ARTICLE I

NAME

The name of this corporation is Kurt A. Wyland, P.A.

ARTICLE II

DURATION

The corporation shall have perpetual existence.

ARTICLE III

NATURE OF BUSINESS

The general nature of business to be transacted by this corporation is:

To engage in every phase and aspect of the business of rendering the same professional services to the public that a lawyer, duly licensed under the laws of the State of Florida, is authorized to render.

ARTICLE IV

CAPITAL STOCK

The maximum number of shares of stock this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares of common stock with a par value of one (\$1.00) per share.

ARTICLE V

INITIAL REGISTERED AGENT

The initial registered agent of the corporation shall be: Kurt A. Wyland

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The street address of the registered office and the principal office of this corporation is: 1645 Palm Beach Lakes Blvd., Suite 800 West Palm Beach, Florida 33401

ARTICLE VI

INITIAL BOARD OF DIRECTORS

This corporation shall have one director initially:

Kurt A. Wyland 1645 Palm Beach Lakes Blvd., Suite 800 West Palm Beach, Florida 33401

ARTICLE VII

INCORPORATOR

The name and address of the person signing these Articles, who is a licensed lawyer is:

Kurt A. Wyland 1645 Palm Beach Lakes Blvd., Suite 800 West Palm Beach, Florida 33401

ARTICLE VIII

ADDITIONAL CORPÖRATE POWERS

The corporation shall have the power to enter into, for the benefits of its employees, one or more of the following:

Pension Plan

Health Plan

Profit Sharing Plan

Thrift and Savings Plan

Other retirement, death benefit, or incentive compensation plans

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 20th day of June, 2000.

Kurt A. Wyland

STATE OF FLORIDA COUNTY OF PALM BEACH

I hereby certify that on this day before me, a Notary Public duly authorized in the State and County aforesaid, to take acknowledgements, personally appeared Kurt A. Wyland, to me well known to be the person described as the incorporator and who executed the foregoing Article of Incorporation, and acknowledged before me that he subscribed to those Articles of Incorporation.

Witness my hand and seal in the State and County aforesaid this 20th day of June, 2000.

Notary Public, State of Florida

My commission expires:



FILED

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CERTIFICATE OF DESIGNATION TALLAHASSEE, FLORIDA 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 o	of the	corpo	ration	is:		<u> Lur</u>	F.A.	<u>. V</u>	/y lo	<u>und</u>	P.A.
2.	The	name a	and st	reet a	iddress	t of	the	regi	ster	≘đ a	gent	and	office
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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.

ND Sad