CAPITAL CONNECTION, INC.

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

Signature Requested by: Name Date Walk-In _ Will Pick Up

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V	Art of Inc. File Photo
-	LTD Partnership File
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	Art. of Amend. File
	RA Resignation PSC 9
	Dissolution / Withdrawal
	Annual Report / Reinstatement
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	Certificate of Good Standag 5
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
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	Fictitious Owner Search
	Vehicle Search
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ARTICLES OF INCORPORATION

OF

Robert Highlands, Inc

The undersigned incorporator(s), 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 shall be:

Robert Highlands, Inc

ARTICLE II PRINCIPAL OFFICE

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

8856 Cherryhill Drive Jacksonville, Florida 32221

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

ARTICLE IV INITIAL REGISTRATION AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Robert Highlands 8856 Cherryhill Drive Jacksonville, Florida 32221

ARTICLE V INCORPORATORS

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

Robert Highlands 8856 Cherryhill Drive Jacksonville, Fl 32221

The undersigned incorporator has executed these Articles of Incorporation this 26th day of June 2000.

Signature

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 and 617.0501, Florida Statutes, the undersigned 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.

The name of the corporation is:

Robert Highlands, Inc

The name and address of the registered agent and office is:

Robert Highlands 8856 Cherryhill Drive Jacksonville, Fl 32220 OO JUN 29 PM 12: 03
SECRE FAIL OF STATE TALLAHASSEE, FLORIDA

HAVING 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.

Signature /

Date