POOOOO 8/096 TRANSMITTAL LETTER ORIGINAL

DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314

600003369716--4 -08/23/00--01073--001 ****122.50 *****78.75

SUBJECT: THOMAS WALLING, INC.

Enclosed is an original and one (1) one copy of the Articles of Incorporation and a check for: \$ 122.50 Filing fee & Certified Copy.

FROM: THOMAS WALLING, INC.

P.O. BOX 110401

PALM BAY, FLORIDA 32911-0401

SECHETARY OF STATE

ORIGINAL

ARTICLES OF INCORPORATION OF

THOMAS WALLING, INC.

The undersigned incorporated(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The Name of the Corporation shall be:

THOMAS WALLING, INC.

ARTICLE II PRINCIPAL OFFICE

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

1227 WING ROAD PALM BAY, FLORIDA 32908

ARTICLE III SHARES

The number of shares of stock that corporation is authorized to have outstanding at one time is: 100

ARTICLE IV INITIAL REGISTERED AGENT & STREET ADDRESS

STEPHEN SMITH 1900 S. HARBOR CITY BLVD. SUITE 227 MELBOURNE, FL 32901

AUG 23 AH 10: 5

ORIGINAL

ARTICLE V INCORPORATED(S)

The incorporators of this Florida Corporation are as follows:

THOMAS WALLING 1227 WING ROAD PALM BAY, FLORIDA 32908

The undersigned incorporator(s) have executed these Articles of Incorporation this 6th_day of AUGUST 21, 2000.

THOMAS WALLING

The above named person(s), who are personally known to me, appeared before me this

21st day of AUGUST, 2000.

Notary Public

STEPHEN G. SMITH NOTARY PUBLIC, STATE OF FLORIDA My Commission Expires January 12, 2003 Comm. # CC 801777

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

ORIGINAL

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUES, 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.

1. The name of the corporation is: THOMAS WALLING, INC.

(Signature)

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

STEPHEN SMITH 1900 S. HARBOR CITY BLVD. SUITE 227 MELBOURNE, FL 32901

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.

AUG 23 AM 10: 5

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314