CAPITAL CONNECTION, INC. 417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (<u>85</u>0) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222 *****78.75 *****78.75 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_ Cert. Copy___ Photo Copy___ Certificate of Good Standing_ Certificate of Status Certificate of Fictitious Name_ Corp Record Search_ Officer Search Fictitious Search_ Fictitious Owner Search Signature Vehicle Search Driving Record_ Requested by: UCC 1 or 3 File UCC 11 Search Name UCC 11 Retrieval L. Burch Walk-In AUG 😅 1 בשעש Will Pick Up Courier

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ARTICLES OF INCORPORATION

OF

NEW CASTLE INVESTORS, INC.

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

ARTICLE I NAME

The name of the corporation shall be:

NEW CASTLE INVESTORS, INC.

ARTICLE II PRINCIPAL OFFICE

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

18135 PALM BREEZE DRIVE TAMPA FL 33647

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JEAN AUGUSTIN 18135 PALM BREEZE DRIVE TAMPA FL 33647

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

JEAN AUGUSTIN 18135 PALM BREEZE DRIVE TAMPA FL 33647

and the second of the control of the

| ine andersigned incorporator(s) | mas (mave) executed | these articles | OT |
|---------------------------------|---------------------|----------------|----|
| Incorporation thisTWENTY-THI | RDday of | _AUGUST | , |
| 20 _00 | × | | |
| | Signature | J. AUGUSTIN | |
| | Signature | | |
| | Signature | | |

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CERTIFICATE OF DESIGNATION SECRETARY OF STATE TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0501 or 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.

| 1. The name of the corporation is: | | |
|--|--|--|
| NEW CASTLE INVESTORS, INC. | | |
| 2. The name and address of the registered agent and office is: | | |
| JEAN AUGUSTIN | | |
| (NAME) | | |
| 18135 PALM BREEZE DRIVE | | |
| (P.O. BOX NOT ACCEPTABLE) | | |
| TAMPA FL 33647 | | |
| (CITY/STATE/ZIP) | | |
| | | |
| | | |
| 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 | | |

SIGNATURE_X

J. AUGUSTIN

DATE_

PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGA-

TIONS OF MY POSITION AS REGISTERED AGENT.