

**CAPITAL CONNECTION, INC.**

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

*POOOOO 90479*  
*Mechanical Industrial Maintenance,*  
*Inc.*

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-09/25/00--01083--016

\*\*\*\*\*78.75 \*\*\*\*\*78.75

Signature \_\_\_\_\_

Requested by: *cm*

*9/25*

*1:45*

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

<input checked="" type="checkbox"/>	Art of Inc. File <i>Cert.</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 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 _____

FILED  
00 SEP 25 AM 9:22  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

RECEIVED  
00 SEP 25 PM 2:44  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATE AFFAIRS  
DEPARTMENT OF STATE

SEP 26 2000  
TALLAHASSEE, FLORIDA  
COURIER

# ARTICLES OF INCORPORATION

## OF

### Mechanical Industrial Maintenance, Inc.

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 **Mechanical Industrial Maintenance, Inc.**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

#### ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is **1000 Hoover Road, Winter Haven, Florida 33884.**

#### 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 one dollar (\$1.00) of per share.

#### **ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is Carl Adkins, 1000 Hoover Road, Winter Haven, Florida 33884.

#### **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 each member of the initial Board of Directors of the corporation is President, Carl Adkins, 1000 Hoover Road, Winter Haven, FL 33884. Vice President, Dan L. Beale, 1000 Hoover Road, Winter Haven, FL 33884. Secretary, Treasurer, 1000 Hoover Road, Winter Haven, FL 33884.

The undersigned has executed these Articles of Incorporation this 25th day of September 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: Mechanical Industrial Maintenance, Inc.
2. The name and street address of the registered agent and office is: Carl Adkins, 1000 Hoover Road, Winter Haven, Florida 33884

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.

  
CARL ADKINS

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00 SEP 25 AM 9:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA