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Florida Department of State
Division of Corporations
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To:
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Fax Number : (850) 922-4001

From:
Account Name : HUBCO
Account Number : 104662003400
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FLORIDA PROFIT CORPORATION OR P.A.

Noram Divide, Inc.

Certificate of Status	1
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ARTICLES OF INCORPORATION

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:

Noram Divide, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Noram Divide, Inc.

**1 IMESON PARK BLVD - BUILDING 100
JACKSONVILLE, FL 32218**

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ARTICLE III SHARES

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

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ARIS NEWTON

**1 IMESON PARK BLVD - BUILDING 100
JACKSONVILLE, FL 32218**

Prepared By:

**Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940**

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ARTICLES V INCORPORATOR(S)

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

ARIS NEWTON
1 IMESON PARK BLVD - BUILDING 100
JACKSONVILLE, FL 32218

JOHN CASKEY
1 IMESON PARK BLVD - BUILDING 100
JACKSONVILLE, FL 32218

JAYE WELLS
1 IMESON PARK BLVD - BUILDING 100
JACKSONVILLE, FL 32218

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

31 day of 10 2000.



ARIS NEWTON
SIGNATURE



JOHN CASKEY
SIGNATURE



JAYE WELLS
SIGNATURE

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Noram Divide, Inc.**

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

ARIS NEWTON

Name

1 IMESON PARK BLVD - BUILDING 100

(P.O. Box or Mail Drop Box NOT Acceptable)

JACKSONVILLE, FL 32218

(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 provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.


ARIS NEWTON
SIGNATURE

10-31-2000

(Date)

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