

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Sonia Magruder, Inc.

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-12/01/00--01064--013
*****70.00 *****70.00

- 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 _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 DEC - 1 PM 2:18

FILED

Signature _____

Requested by: LS

Name _____

Walk-In _____

VISION OF CORPORATION
00 DEC - 1 PM 12:59

Date 12/7/00 Time 12:04

Will Pick Up _____

T. Burch

DEC 1 2000

ARTICLES OF INCORPORATION

OF

Sonia Magruder, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 DEC - 1 PM 2: 18

FILED

The undersigned incorporator, for the purpose of forming a corporation under Florida General Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I. NAME

The name of the corporation shall be:

Sonia Magruder, Inc.

The principal place of business of this corporation shall be:

***1504 Bookman Drive
Holiday, Fl 34690***

The mailing address of this corporation shall be:

***1504 Bookman Drive
Holiday, Fl 34690***

ARTICLE II. NATURE OF BUSINESS

This corporation may engage in or transact any or all-lawful activities of business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of that this corporation is authorized to have outstanding at any one time is 10,000 shares of common stock have \$1.00 per value per share.

ARTICLE IV. TERM OF EXISTENCE

The corporation is to exist perpetually.

ARTICLE V. OFFICERS DIRECTORS

This corporation is to have one director and one officer, initially. The name and street address of the initial director and officer who shall hold office for the first year of the corporation's existence, or until his successor is elected or appointed is:

*Sonia Magruder
President*

*1504 Bookman Drive
Holiday, Fl 34690*

ARTICLE VI. INCORPORATOR

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

Sonia Magruder

*1504 Bookman Drive
Holiday, Fl 34690*

IN WITNESS WHEREOF, the under signed incorporator has executed these Articles of Incorporation this 29 day of NOVEMBER, 2000.

Signature of Incorporator


Incorporator

STATE OF FLORIDA
COUNTY OF PINELLAS

THE FOREGOING instrument was acknowledge and sworn to before me this 29 day of NOVEMBER, 2000, by SONIA MAGRUDER OF SONIA MAGRUDER, INC.

Notary Public

 Peter Makris
Commission # CC 748025
Expires June 7, 2002
BONDED THRU
ATLANTIC BONDING CO., INC.



FILED

CERTIFICATE DESIGNATING

00 DEC -1 PM 2:12

REGISTERED AGENT / REGISTERED OFFICE

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provision of Section 607.325, 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:

SONIA MAGRUDER, INC.

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

Name: SONIA MAGRUDER

Address: 1504 BOOKMAN DRIVE

City: HOLIDAY State: FL Zip Code: 34690

SIGNATURE: Sonia Magruder

TITLE: PRESIDENT

DATE: 11/28/00

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE: Sonia Magruder

DATE: 11/28/00