

P00000115953

December 13, 2000

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl 32314

FILED  
00 DEC 15 PM 11:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SUBJECT: G.W. HEDDLESON INC.**

Enclosed is an original and one(1) copy of the articles of incorporation and a check for \$70.00 representing the Filing Fee..

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-12/18/00--01012--012  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

**From:**

James E. Marci  
8090 Greenbrier Ct.  
Spring Hill, Fl 34606

CB 12-20

**ARTICLES OF INCORPORATION  
OF  
G.W. HEDDLESON INC.**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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 shall be:  
G.W. HEDDLESON INC.

**ARTICLE II PRINCIPAL OFFICE**

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

116 COMMERCIAL WAY, SUITE 5  
SPRING HILL, FL 34606

**ARTICLE III SHARES**

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

1000 SHARES OF COMMON STOCK, EACH SHARE HAVING A  
PAR VALUE OF ONE DOLLAR (\$1.00)

**ARTICLE IV INITIAL REGISTERED AGENT**

The name and Florida street address of the initial registered agent are:


JAMES E. MARCI  
8090 GREENBRIER COURT  
SPRING HILL, FL 34606

## **ARTICLE V INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:

JAMES E. MARCI  
8090 GREENBRIER COURT  
SPRING HILL, FL 34606

  
\_\_\_\_\_  
**Signature/ Incorporator**

  
\_\_\_\_\_  
**Date**

*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.*

  
\_\_\_\_\_  
**Signature/ Registered Agent**

  
\_\_\_\_\_  
**Date**