TRANSMITTAL LETTER

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

SUBJECT:

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee \$78.75

Filing Fee

& Certificate

\$122.50

\$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy & Certificate

Additional Copy Required

From: _	Terrie	Glas	55 <i>Co</i> 6	ck					
Name (printed or typed)									
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	Address								
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	C	City, State &	& Zip		LORIDA	10: 20	D		
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16550016	Daytin	ie Telephoi	ne num	ber	·	•			

AUTHORIZATION BY PHONE TO

CORRECT Dame of Corporation

DATE 1-22-2001

DOC. EXAM _CB

NOTE: Please provide the original and one copy of the articles

FILED

01 JAN 18 AM 10: 20

ARTICLES OF INCORPORATION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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: M.T. I. Inc.

ARTICLE II PRINCIPAL OFFICE

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

7600 SW 22 Street Ocala Fl. 34474

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

7600 SW 22 Street Ocala, Fl. 34474

ARTICLES V INCORPORATOR(S) See instructions for officers/directors

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

Terrie Glasscock
7600 SW 22 Street
Ocala Fl. 34474

Lance Mitchell
7600 SW 22 Street
Ocala, Fl. 34474

		or(s) has (have) ex			orporation this
15 th	day of	January	,Ť	2001 	
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	The second	in Glasser	ek		
		Signatu			
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NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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 DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	··· ··· ·· · · · · · · · · · · · · · ·							
	· · · · · · · · · · · · · · · · · · ·							
2. The name and address of the registered agent and office is:								
Terrie Glasscock								
Terrie Glasscock (Name)								
7600 SW 22	Street							
7600 SW 22 Street (P.O. Box or Mail drop Box Not Acceptable)								
Ocala Fl. 344	14							
Ocala Fl. 34474 (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 statutes obligations of my position as registered agent. Description								
(Signature)	Pate) FILE D SECRETARY OF STALLAHASSEE, FLO							

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, F