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Requester's Name

Address

OTW DESIGNS, INC  
499 CYPRESS ST  
ALTAMONTE SPRINGS, FL

Office Use Only

CORP

32714 UMBER(S), (if known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 MAR 26 AM 7:25

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- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

OTHER FILINGS

- ☐ Annual Report  
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

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\*\*\*\*\*122.50 \*\*\*\*\*78.75

F. CHESTER

APR 2 2000

Examiner's Initials

# ARTICLES OF INCORPORATION

of  
Florida Appraisal Specialist, Inc.  
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

## ARTICLE I - CORPORATE NAME

The name of the corporation is:  
Florida Appraisal Specialist, Inc.

## ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

## ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

## ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue Five Hundred shares ( 500 ) of one  
Dollar(s) (\$ 1.00 ) par value Common Stock, which shall be designated "Common Shares."

## ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	Mark McLearn		
ADDRESS	1455 Semoran Boulevard #149-75		
CITY	Casselberry	FLORIDA	ZIP 32707

The principal office, if known, or the mailing address of the corporation is:

NAME	Florida Appraisal Specialist, Inc.		
ADDRESS	1455 Semoran Boulevard #149-75		
CITY	Casselberry	FLORIDA	ZIP 32707

## ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one ( 1 ) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	Mark McLearn		
ADDRESS	1455 Semoran Boulevard #149-75		
CITY	Casselberry	STATE Florida	ZIP 32707
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

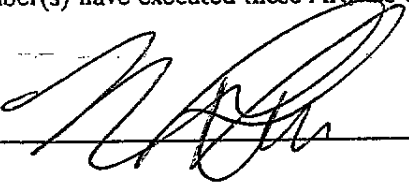
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TALLAHASSEE, FLORIDA

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Mark McLearn		
ADDRESS	1455 Semoran Boulevard #149-75		
CITY	Casselberry	STATE	Florida
		ZIP	32707
NAME			
ADDRESS			
CITY		STATE	
		ZIP	
NAME			
ADDRESS			
CITY		STATE	
		ZIP	

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 17th  
day of March, 2004

  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Seal)  
(Seal)  
(Seal)

CERTIFICATE AND ACKNOWLEDGEMENT  
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT  
OF

Florida Appraisal Specialist, Inc.

*(name of corporation)*

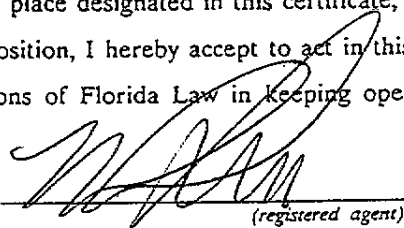
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:  
The above corporation, desiring to organize under the laws of the State of Florida with  
its registered office as indicated in the Articles of Incorporation

at 1455 Semoran Boulevard #149-75  
Casselberry, Florida 32707

has named Mark McLearn  
located at the aforesaid address, as its Registered Agent to accept service of process  
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above  
stated corporation at the place designated in this certificate, and being familiar with  
the obligations of that position, I hereby accept to act in this capacity, and agree to  
comply with the provisions of Florida Law in keeping open said office.

  
(registered agent)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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