

PA10000051188

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

FILED  
MAY 15 AM 11:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: ACCURATE APPRAISAL ASSOCIATES of NORTH  
FLORIDA, INC.

500004219585--4  
-05/16/01--01042--009  
\*\*\*\*122.50 \*\*\*\*\*78.75

Enclosed is an original and one( ) of incorp. a check for :

☐ \$70.00  
Filing Fee

☒ \$11.00  
Filing  
& Co

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

COPY REQUIRED

FROM: Jim G. Hardin

EFFECTIVE DATE  
6-1-01

1429 DANLODEGA LANE

JACKSONVILLE, FL 32224

(904) 992-8563

NOTE: Please

le articles.

3-23-01  
WC

ARTICLES OF INCORPORATION  
OF  
ACCURATE APPRAISAL ASSOCIATES OF NORTH FLORIDA, INC.

FILED  
01 MAY 15 AM 11:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned subscriber of these Articles of Incorporation, a natural person competent to contract, hereby acts as an incorporator to form a corporation under the laws of the State of Florida and adopts the following Articles of Incorporation for such corporation.

ARTICLE I. NAME

The name of the corporation is ACCURATE APPRAISAL ASSOCIATES OF NORTH FLORIDA, INC.

ARTICLE II. COMMENCEMENT OF EXISTENCE

The existence of the corporation will commence on JUNE 1, 2001.

EFFECTIVE DATE  
6-1-01

ARTICLE III. PURPOSE

This corporation may engage in any activity or business permitted under the laws of the United States and Florida.

ARTICLE IV. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock having a par value of \$1.00 per share.

ARTICLE V. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered agent and office of the corporation is 14329 DAHLONEGA LANE JACKSONVILLE, FL 32224. The name of the initial registered agent at that address is JIM G. HARDIN. The signature of JIM G. HARDIN as incorporator of ACCURATE APPRAISAL ASSOCIATES OF NORTH FLORIDA, INC. indicates that he accepts the duties and obligations of the position of registered agent.

ARTICLE VI. INITIAL BOARD OF DIRECTORS

This corporation shall initially have four directors. The number of directors may be either increased or diminished from time to time, as provided by the By-Laws. The names and addresses of the members of the first Board of Directors are:

Chairman of the Board

JIM G. HARDIN  
JACKSONVILLE, FL

Member

RICHARD R. WRAY  
JACKSONVILLE, FL

Member

JOHNATHON S. SMITH  
JACKSONVILLE, FL

Member

DAVID R. PARSLEY  
CALLAHAN, FL

#### ARTICLE VII. PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office and mailing address of this corporation is:  
14329 DAHLONEGA LANE  
JACKSONVILLE, FL 32224

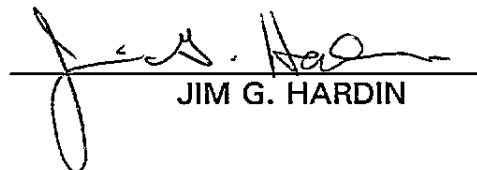
#### ARTICLE VIII. INCORPORATOR

The name and address of the incorporator signing these Articles of Incorporation is: JIM G. HARDIN 14329 DAHLONEGA LANE JACKSONVILLE, FL 32224. The incorporator of the corporation assigns to this corporation the rights under section 607.161, Florida Statutes, to constitute a corporation, and he assigns to those persons designated by the Board of Directors any rights he may have as incorporator to acquire any of the capital stock of this corporation, this assignment becoming effective on the date existence begins.

#### ARTICLE IX. AMENDMENTS

This corporation reserves the right to amend, alter, change or repeal any provisions contained in these Articles of Incorporation or any amendment hereto and any right conferred upon a shareholder is subject to this reservation.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation, this 11TH DAY OF MAY 2001.

  
JIM G. HARDIN

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: ACCURATE APPRAISAL ASSOCIATES  
of NORTH FLORIDA, Inc.

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

Jim G. Hardin

(NAME)

14329 DANLONEGA LANE

(P.O. BOX NOT ACCEPTABLE)

JACKSONVILLE FL 32224

(CITY/STATE/ZIP)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 MAY 15 AM 11:12

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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

Jim G. Hardin

DATE

11 MAY 01