**Charter Number Only** Requestor's Name

> 0 N

Address City State ZIP

CORPORATION(S) NAME

-05/25/01--01025--006

\*\*\*\*\*78.75 6 Profit NonProfit ( ) Amendment ( ) Merger ) Foreign ( ) Dissolution ( ) Mark ) Limited Partnership ) Annual Report ( ) Other ) Reinstatement ) Reservation ) Change of Registered Agent Certified Copy ( ) Photo Copies ( ) Certificate Under Seai ) Call When Ready ) Call If Problem ( ) After 4:30 Welk\_In ( ) Will Wait Pick Up ( ) Mail O Availability Document Examiner Update Verifier

CR2E031 (R8-85)

Acknowledgment

W.P. Varifie

	*	
ARTICLE Space space	ES OF INCORPORATION	To Second
G.P. MIL	(name of corporation)	550
The undersigned subscriber(s) to these Articles of corporation under the laws of the State of Florida.	f Incorporation, natural person(s) compete	ent to contract, Hereby form a
The finance of the corporation is.	CLE I - CORPORATE NAME	
G. P. M12		<u> </u>
This corporation shall exist perpetually unless diss	RTICLE II - DURATION solved according to Florida law.	
Al	RTICLE III - PURPOSE	
The corporation is organized for the purpose of enumerical States and the State of Florida.	gaging in any activities or business permi	tted under the laws of the
	CLE IV- CAPITAL STOCK	
The corporation is authorized to issue ONE F Dollar(s) (\$) par value Common	shares ( 100 ) of Stock, which shall be designated "Comn	non Shares".
ARTICLE V - INITIA	AL REGISTERED OFFICE AND AGENT	
The street address of the Initial Registered Agent o	office and the name of the Initial Registere	ed Agent at that office is:
NAME GAIL ALLEN		
ADDRESS 409 NW 20 57	REET	
CITYWILTON MANDRS	FLORIDA	ZIP <i>33311</i>
The principal office, if known, or the mailing addre	ess of the corporation is:	
NAME G. P. MILBY, 11	VC.	
· · · · · · · · · · · · · · · · · · ·	REET	
CITY WILTON MANORS	FLORIDA	ZIP 3231/

## ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have(		of directors may be either. The names and addresses
or the corporation are as follows:	iows:	
NAME GAIL ALLEN		
ADDRESS 409 NU/ 20 STA	2-7-1	
CITY WILTON MANORS		
NAME	STATE FL	ZIP3331/
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME GAIL ALLEN ADDRESS 409 NW 20 51	REET	
CITY WILTON MANORS	STATE FL	ZIP <i>333</i> //
NAME		Zn <u>93,5//</u> _
ADDRESS		
CITY	STATE	710
VAME		ZIP
ADDRESS		
CITY	STATE	
		ZIP
N WITNESS WHEREOF, the undersigned subscriber lay of	STATE  (s) have executed these Articles of Incorpo	ration this 24
•	Spail allen)	) (Seal)
		(Seal)
		(Seal)

## CERTIFICATE AND KNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT OF

G. P. MILBY, 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
WILTON MANORS, FR. 33311
has named GAIL ALLEN
located at the aforesaid address, as its Registered Agent to accept service of process within
this state. $ \frac{785}{11} = 01 $
ACKNOWLEDGEMENT SSE 25
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 obliga-
tions 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.

<u>Jail Allen</u> (registered agent)