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FILED  
2001 AUG - 8 PM 12: 57  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 405235 80913A

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : August 8, 2001

ORDER TIME : 11:09 AM

ORDER NO. : 405235-005

CUSTOMER NO: 80913A

CUSTOMER: Ms. Kathy Prevatt  
Salter Feiber Yenser & Murphy

703 Northeast 1st Street

Gainesville, FL 32601

300004524593--0  
-08/08/01--01047--022  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

DOMESTIC FILING

NAME: GASTON'S STORM RECOVERY, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP  
       ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson - EXT. 1155  
EXAMINER'S INITIALS:

RECEIVED  
01 AUG - 8 AM 11: 27  
DIVISION OF CORPORATION

18/8/01

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLES OF INCORPORATION  
OF  
GASTON'S STORM RECOVERY, INC.**

THE UNDERSIGNED incorporator does hereby agree to incorporate a corporations for profit under the laws of the state of Florida, of the United States of America, by and under the provisions and statutes of that State, providing for the formation, liability, rights, privileges, benefits and obligations conferred and imposed by said law on corporations organized pursuant to the provisions there of, and hereby makes, subscribes and acknowledges and files these Articles of Incorporation as follows:

**ARTICLE I  
NAME OF CORPORATION**

1.01 NAME.— The name of this corporation shall be GASTON'S STORM RECOVERY, INC.

**ARTICLE II  
GENERAL NATURE OF BUSINESS**

2.01 POWERS.— This corporation may engage in any activity or business permitted under F.S. 607 of the laws of the State of Florida.

**ARTICLE III  
STOCK**

3.01 NUMBER.— The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is one class of Common Stock totaling 100 shares and having a par value of \$1.00 per share.

**ARTICLE IV  
ADDRESS OF CORPORATION AND REGISTERED AGENT**

4.01 PRINCIPAL OFFICE.— The street address of the principal office of the proposed corporation in the State of Florida is 1901 NW 67<sup>th</sup> Place, Suite E, Gainesville, Florida 32653. The mailing address of the corporation is 1901 NW 67<sup>th</sup> Place, Suite E, Gainesville, Florida 32653.

4.02 RELOCATION.— The Board of Directors may from time to time move the principal office to any other address in Florida.

4.03 REGISTERED AGENT.—The initial registered agent of the corporation is William G. Gaston, III and his address is 1901 NW 67<sup>th</sup> Place, Suite E, Gainesville, Florida 32653.

**ARTICLE V**  
**NAME AND ADDRESS OF INCORPORATOR**

**5.01 DESIGNATION.**— The name and street address of the incorporator of the Articles of Incorporation is as follows:

<u><b>Name</b></u>	<u><b>ADDRESS</b></u>
William G Gaston, III	1901 NW 67 <sup>th</sup> Place, Suite E, Gainesville, Florida 32653.


THE UNDERSIGNED, being the Incorporator to the Capital Stock hereintofore named, for the purpose of forming a corporation to do business both within and without the State of Florida, does make, subscribe, acknowledge and file these Articles, hereby declaring and certifying that the facts herein stated are true.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 19 day of July 2001.


  
William B. Gaston, III

**STATE OF FLORIDA**  
**COUNTY OF ALACHUA**

The foregoing instrument was acknowledged before me this 19 day of July, 2001, by William G. Gaston, III the Incorporator, who executed the foregoing Articles of Incorporation, and he acknowledges before me that he executed the same for the purposes therein expressed.

 **Paul Grant**  
My Commission CC911333  
Expires February 18, 2004

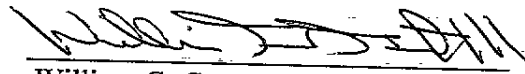
(SEAL)

  
Notary Public, State of Florida  
My Commission Expires  
Serial Number:

**CERTIFICATE OF REGISTERED AGENT**


I hereby accept designation of registered agent for GASTON'S STORM RECOVERY, INC and hereby agree to fulfill the obligations thereof.

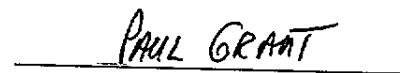
IN WITNESS WHEREOF, I have hereunto set my hand and seal this 19 day of July 2001.

  
William G. Gaston, III

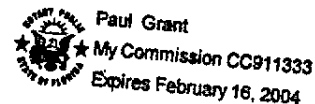
**STATE OF FLORIDA  
COUNTY OF ALACHUA**

The foregoing instrument was acknowledged before me this 19 day of July, 2001, by William G. Gaston, III, Registered Agent, who executed the foregoing Certificate of Registered Agent, and he acknowledged before me that he executed the same for the purposes therein expressed. Such person is personally know to me, produced a current Florida Driver's license as identification.

  
Notary Sign Name Above  
Notary print name below

  
Notary Public , State of Florida  
My Commission expires:  
Serial Number:

(SEAL)



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