TRANSMITTAL LETTER Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$70.00 □ \$78.75 □ \$78.75 □ \$87.50 Filing Fee Filing Fee Filing Fee, Filing Fee Certified Copy & Certificate of Status & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED 850-222-6000 Daytime Telephone number

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

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## ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAMEThe name of the corporation shall be: Capital management Group, Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 335 Beard street Tallahassee 74. 32303 *PURPOSE* The purpose for which the corporation is organized is: ARTICLE IV SHARES The number of shares of stock is: 100 shares ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es): Donald G. Ray, President 337 Hunters Clossing Tallahussee, 71. 38312 Tallahussee, 71. REGISTERED AGENT ARTICLE VI The name and Florida street address of the registered agent is: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Tallahossee H1-32312 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this

certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator