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pivision of Corporations

Fax Number : (850) 205-0381.

From:

Account Name : CAPITAL CONNECTION, INC.

Account Number : 120000000257 : (850)224-8870

Fax Number : (850)222-1222

FLORIDA PROFIT CORPORATION OR P.A.

Kinsell & Salter, P.A.

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| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$78.75 |

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ARTICLES OF INCORPORATION

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OF

Kinsell & Salter, P.A.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is Kinsell & Salter, P.A. The purpose of this corporation is to practice law.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 519 NW 60th Street, Suite A, Gainesville, FL 32607.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares without par value.

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ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Steven Miles Kinsell, 519 NW 60th Street, Suite A, Gainesville, FL 32607.

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of each member of the initial Board of Directors of the corporation is: Steven Miles Kinsell - 621 NW 35th Terrace, Gainesville, FL 32607 David P. Salter - 4020 NW 21st Street, Gainesville, FL 32601

The undersigned has executed these Articles of Incorporation this 28th day of September, 2001/

"Capital Connection, Inc. by A. Kim Clemons, Client Representative"

A. KIM CLEMONS

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Fursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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 corporati | lon is: | Kinsell | & SAWFR | P.G. |
|----|----------|------------------|---------|---------|-----------|--------|
| Z. | The name | and street addr | <u></u> | · A | agent and | office |
| | | N MILES Kin | | 7 | • | |

HAVE 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.

SECRETARY OF STATE DIVISION OF CORPORATIO