CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222



Art of Inc. File_

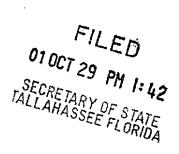
Jim	Bicher	Consulting	Inc.
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ARTICLES OF INCORPORATION

OF



Jim Bishop Consulting, Inc

The undersigned incorporator(s), 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 shall be:

Jim Bishop Consulting, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

9374 Fish Road Jacksonville, Florida 32220

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

ARTICLE IV INITIAL REGISTRATION AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

James D. Bishop 9374 Fish Road Jacksonville, Florida 32220

ARTICLE V INCORPORATORS

The name and street address of the incorporator to these Articles of Incorporation is:

James D. Bishop 9374 Fish Road Jacksonville, Fl 32220

The undersigned incorporator has executed these Articles of Incorporation this 25^{th} day of October 2001

Signature

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 and 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.

The name of the corporation is:

Jim Bishop Consulting, Inc

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

James D. Bishop 9374 Fish Road Jacksonville, Fl 32200

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

OCT 2 5 2001

Date

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SECRETARY OF STATE