

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634-3694 Far Number: (305)633 9696

FLORIDA PROFIT CORPORATION OR P.A.

tri-county rodbusters, inc.

Certificate of Status	0
Certified Copy	1
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April 5, 2002

EMPIRE

SUBJECT: TRI-COUNTY RODBUSTERS, INC,.

REF: W02000009428

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and retax the complete document, including the electronic filing cover sheet.

THE INDIVIDUALS LAST NAME IS NOT SPELLED CONSTSTENT.

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Neyca Culligan Document Specialist New Filing Section FAX Aud. #: H02000072098 Letter Number: 602A00019766 P.O. BOX 772752, CORAL SPRINGS, FL. 33077.

ARTICLES OF INCORPORATION

ARTICLE I - NAME

The name of this corporation is TRI-COUNTY RODBUSTERS, INC. The principal address and the mailing address of the corporation is

ARTICLE II - DURATION

This corporation shall have perpetual existence commencing on the date of the filing of these Articles with the Department of State.

ARTICLE III - FURPOSE

This comporation is organized for the purpose of transacting any or all lawful business.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 100 shares of \$1.00 par value common stock which shall be designated "Common Shares".

ARTICLE V - PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation shall have the right to purchase his prorate share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

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ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 448 NW 105 DRIVE, CORAL SPRINGS 33071. The name of the initial registered agent of this corporation at that address is CASEY MCCREE. The registered office of this corporation is the same as the street address.

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have 1 Director(s) constituting the initial Board of Directors. The number of Directors may be either increased or decreased from time to time by the ByLaws. The name(s) and address(es) of the initial Board of Directors of this corporation is (are):

CASEY MCCREE

448 NW 105 DRIVE CORAL SPRINGS, FL. 33071

ARTICLE VIIJ - INCORPORATORS

The name and address of each person signing these Articles is:

CASEY MCCREE

448 NW 105 DRIVE CORAL SPRINGS, FL 33071

ARTICLE IX - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE X - AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

STATE OF FLORIDA COUNTY OF BROWARD

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this day of , 20 .

Notary Public, State of Florida at Large

My commission Expires

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUES, THE FOLLOWING IS SUBMITTED:

TRI-COUNTY RODBUSTERS, INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE CITY OF CORAL SPRINGS STATE OF FLORIDA, HAS NAMED CASEY MCCREE LOCATED AT 448 NW 105TH DRIVE AS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA.

SIGNATURE: / COOKER CASEY MCCREE

TITLE: PRESIDENT

DATE: 4/04/02

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATIVE TO THE PROPER PERFORMANCE OF MY DUTIES.

SIGNATURE: (Resident Agent)

DATE: 4/04/02

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