

Florida Department of State 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 : YOUR CAPITAL CONNECTION, INC.

Account Number : I20000000257

Phone : (850)224-8870 Fax Number : (850)222-1222

FLORIDA PROFIT CORPORATION OR P.A.

RICHARDSON TRUST INVESTMENT CORPORATION

Certificate of Status	0
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 30, 2002

YOUR CAPITAL CONNECTION

SUBJECT: RICHARDSON TRUST INVESTMENT CORPORATION REF: W02000012334

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

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.)

The registered agent must sign accepting the designation.

If you have any further questions concerning your document, please call (850) 245-6931.

Becky McKnight Document Specialist New Filing Section FAX Aud. #: H02000120893 Letter Number: 502A00026583

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32814

H02000120893 1

ARTICLES OF INCORPORATION

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

ARTICLE I: NAME

The name of the corporation shall be:

RICHARDSON TRUST INVESTMENT CORPORATION

ARTICLE II: PRINCIPAL OFFICE

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

c/o Eclipse Financial Services, L.L.C. 4501 Ford Avenue Suite 102 Alexandria, Virginia 22301

ARTICLE III: SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

one thousand (1,000) shares having no par value.

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Capital Connection, Inc. 417 East Virginia Street Suite 1 Tallahassee, Florida 32302

ARTICLE V: INCORPORATOR

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

Robert O. Shemeld c/o Eclipse Financial Services, L.L.C. 4501 Ford Avenue Suite 102 Alexandria, Virginia 22301

Signature/Incorporator

HO2000120893 1

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant 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. T	he nam	e of the c or on Trust In	poration vestmen	on is: it Corpora	atio	<u> </u>		
*****	CHELOS					*		
2. :	The nar	e and stree	t addre	ss of the	reg	istered agent	and	office
is:_ Ca	pital	Connection,	417 E	Virginia	st,	Tallahassee	FL 1	32301

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.

H02000120893 1