

McBAYNE'S CONSTRUCTION &
RENOVATION, INC.

P02000055680

FILED STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
02 MAY 17 PM 4:59

May 10, 2002

Secretary of State
Division of Corporations
P.O. box 6327
Tallahassee, FL 32314

100005557551--7
-05/17/02--01046--019
*****87.50 *****87.50

RE: THE McBAYNE GROUP, INC.

To Whom It May Concern:

Enclosed are an original and one (1) copy of the Articles of Incorporation for THE McBAYNE GROUP, INC., and a check in the amount of \$87.50, representing fees for filing, certified copy and a certificate of status.

Sincerely,



Trevor McBayne
President

TM/tlh
Enclosures

F. GRESSER MAY 20

**ARTICLES OF INCORPORATION
OF
THE McBAYNE GROUP**

ARTICLE I: NAME

The name of the Corporation shall be:

THE McBAYNE GROUP

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address is:

3600 S. State Road 7, Suite 15
Miramar, Florida 33023

ARTICLE III: PURPOSE

The purpose for which the corporation is organized is to do business in the State of Florida in compliance with Chapter 607 and Chapter 621, F.S.

ARTICLE IV: SHARES

The number of shares of stock is 5,000 at \$100 per share.

ARTICLE V: SHAREHOLDER

The sole shareholder of 100% of the shares is:

Trevor McBayne
3600 S. State Road 7, Suite 15
Miramar, Florida 33023

ARTICLE VI: INITIAL OFFICER/DIRECTOR

The initial officer and director is:

Trevor McBayne
3600 S. State Road 7, Suite 15
Miramar, Florida 33023

Director, President,
Secretary and Treasurer

ARTICLE VII: REGISTERED AGENT

The name and address of the registered agent is:

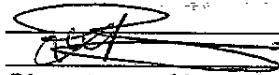
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Trevor McBayne
3600 S. State Road 7, Suite 15
Miramar, Florida 33023

ARTICLE VIII: INCORPORATOR

The name and address of the incorporator is:

Trevor McBayne
3600 S. State Road 7, Suite 15
Miramar, Florida 33023



Signature of Incorporator

Date

5/13/02

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Having been named as Registered Agent to accept process of service 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 of Registered Agent

Date

5/13/02

COUNTY OF BROWARD:

: SS

STATE OF FLORIDA :

SWORN TO AND SUBSCRIBED before me on this _____ day of May, 2002, by

_____ who is personally known to me or has produced personal
identification _____

NOTARY PUBLIC, STATE OF FLORIDA
My Commission Expires: