

P02 0000 67602

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Hammett Investments, Inc.

000005860570--0

-06/19/02--01042--017

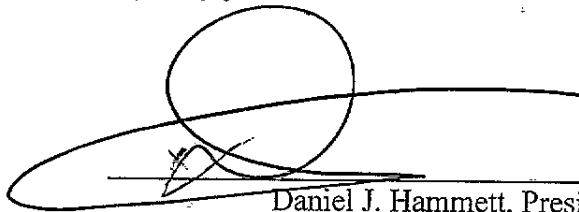
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$70.00.

This represents the cost of the Filing Fees and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.



Daniel J. Hammett, President

Hammett Investments, Inc.  
(Name of Corporation)

<b>MAILING ADDRESS OF CORPORATION</b>		
5960 Broken Bow Lane		
Port Orange, FL 32127		
PHONE		
( 386 )	767-2930	
Area Code	Number	Ext.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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D. WHITE JUN 19 2002

ARTICLES OF INCORPORATION  
of

FILED

Hammett Investments, Inc.  
(name of corporation)

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The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, do hereby adopt(s) the following articles of incorporation for such corporation:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I - CORPORATE NAME

The name of the corporation is:

Hammett Investments, Inc.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 100 shares of common stock, par value \$ 1 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS			
5960 Broken Bow Lane			
CITY	Port Orange	FLORIDA	ZIP 32127

Mailing address, if different

STREET ADDRESS Same			
CITY		FLORIDA	ZIP

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	Daniel J. Hammett		
ADDRESS	5960 Broken Bow Lane		
CITY	Port Orange	FLORIDA	ZIP 32127

### ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have Two ( 2 ) director initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

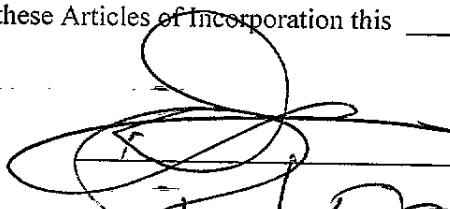
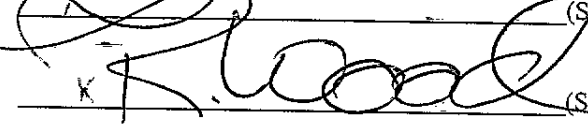
NAME	Daniel J. Hammett, President		
ADDRESS	5960 Broken Bow Lane		
CITY	Port Orange	STATE	Florida ZIP 32127
NAME	Richard G. Wood, Vice President/Secretary		
ADDRESS	2608 Travida Drive		
CITY	Deltona	STATE	Florida ZIP 32738
NAME			
ADDRESS			
CITY		STATE	ZIP

### ARTICLE VIII - INCORPORATORS

The names and address of the incorporators signing these Articles of Incorporation are as follows:

NAME	Daniel J. Hammett, President		
ADDRESS	5960 Broken Bow Lane		
CITY	Port Orange	STATE	Florida ZIP 32127
NAME	Richard G. Wood, Vice President/Secretary		
ADDRESS	2608 Travida Drive		
CITY	Deltona	STATE	Florida ZIP 32738
NAME			
ADDRESS			
CITY		STATE	ZIP

The undersigned incorporator(s) have executed these Articles of Incorporation this 5<sup>th</sup>  
day of June, 20 02.

  
(Signature)  
  
(Signature)  
\_\_\_\_\_  
(Signature)

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Hammett Investments, Inc.

Pursuant of Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

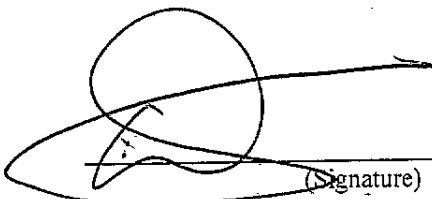
at 5960 Broken Bow Lane

Port Orange, FL 32127

has named Daniel J. Hammett

located at the aforesaid address, as its registered agent to accept service of process within this state.

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)

June 5, 2002

(Date)