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AUDREY SUE MILTON, ESQUIRE POST OFFICE BOX 61086 FORT MYERS, FLORIDA 33906 239 277-9955

02 JUN 26 PH 4: 24

SECRETARY OF STATE TALLAHASSEE. FLORIDA

JUNE 20, 2002

Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

800006038398**-**-3 -06/26/02--01033--012 ******78.75 ******78.75

TRANSMITTAL LETTER

SUBJECT: T S F LEASING INC.

Enclosed please find an original and one (1) copy of the Articles of Incorporation and Designated Registered Agent acceptance for the above corporation and check in the amount of \$78.75 for filing in the above corporation. Please return a certified copy to me at the

FROM: AUDREY SUE MILTON, ATTORNEY AT LAW POST OFFICE BOX 61086

Fort Myers, Florida 33906

You are not authorized to make any changes. In the event you should have any questions please feel free to contact me at the above address and/or telephone number.

truly yours,

Audrey Sue Milton, Esquire ASM/ac

EFFECTIVE DATE

ARTICLES OF INCORPORATION FOR T S F LEASING, INC.

FILED

02 JUN 26 PM 4: 24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, the undersigned incorporator, for the purpose of forming a corporation under the provisions of Chapter 607, Florida Statutes, Florida Business Corporation Act do hereby make, execute and adopt the following articles of Incorporation to-wit:

ARTICLE I NAME

The name assumed by this corporation and by which it shall be known in law EFFECTIVE JUNE 20,2002 is

T S F LEASING, INC.

ARTICLE II PRINCIPAL OFFICE

- 1. The principal place of business and mailing address of this corporation shall be shall be 3460 NORTH KEY DRIVE, E 307, NORTH FORT MYERS, FLORIDA 33903, County of Lee, and State of Florida.
- 2. The address of the initial registered office is 3460 NORTH KEY DRIVE, E 307, NORTH FORT MYERS, FLORIDA 33903.
- 3. The mailing address of the registered office is the same as above.
- 4. The name of the registered agent at the registered office is TAMI SIMS FARRELL

ARTICLE III DURATION

The time for which the corporation shall be created shall be perpetual.

ARTICLE IV PURPOSE

The purpose for which the corporation is organized is for the any lawful business authorized by the laws of the State of Florida, United States of America.

ARTICLE V CAPITAL STOCK

There shall be one class of capital stock known as "common stock" and the number of shares of common stock that this corporation is authorized to have outstanding at any one time is: **ONE HUNDRED**Shares of common stock zero par value.

ARTICLE VI INCORPORATOR

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

TAMI SIMS FARRELL 3460 NORTH KEY DRIVE, E 307 NORTH FORT MYERS, FLORIDA 33903 FOR T S F LEASING, INC.

ARTICLE VII INITIAL DIRECTORS

The names and street addresses of the initial Directors are:

TAMI SIMS FARRELL

3460 NORTH KEY DRIVE E 307

NORTH FORT MYERS, FLORIDA 33903

IN WITNESS WHEREOF, we, the parties hereby associating, for the purpose of giving legal effect to these articles hereunto sign our names and places of residence:

Done at the Fort Myers, county of Lee and State of Florida, this $\underline{20TH}$ day of JUNE , $\underline{2002}$

AMN SIMS FARRELL

'Incorporator

3460 NORTH KEY DRIVE, E 307

NORTH FORT MYERS, FLORIDA 33903

FILED 02 JUN 26 PM 4: 24 SECRETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, 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 corporations is: T S F LEASING, INC.
- The name and address of the registered agent and office is

TAMI SIMS FARRELL 3460 NORTH KEY DRIVE, E 307 NORTH FORT MYERS, FLORIDA 33903 SIGNATURE

JUNE 20,2002 DATE

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.

DAT

SIGNATURE