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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) 224-7047

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT CORPORATION OR P.A.**

**M & D ADVENTURES INC.**

Certificate of Status	0
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## ARTICLES OF INCORPORATION

OF

### M & D ADVENTURES INC.

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

#### ARTICLE I: NAME

The name of the corporation is M & D ADVENTURES INC.

#### ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 5836 SE Lillian Circle, Belleview, FL 34420.

#### ARTICLE III: CAPITAL STOCK

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 a par value of (\$1.00) per share.

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**ARTICLE IV: INTIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is Mitchell Denker, 5836 SE Lillian Circle, Belleview, FL 34420.

**ARTICLE V: INCORPORATOR**

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

**ARTICLE VI: INTIAL BOARD OF DIRECTORS**

The name and address of the initial Board of Directors of the corporation is Dennis Dercole, Box 999, Summerfield, FL 34492.

**ARTICLE VII: SPECIAL PROVISION**

It is the intent of the incorporator and directors that the corporation qualify under Section 1244 of the Internal Revenue Code and that the corporation file as a Sub S Corporation. Such actions as are necessary will be taken by the appropriate officers to accomplish this compliance.

The undersigned has executed these Articles of Incorporation this 3rd day of September 2002.

"Capital Connection, Inc. by Stacey Leggett, Client Representative"

Stacey Leggett

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**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. The name of the corporation is: M & D ADVENTURES, INC.

2. The name and street address of the registered agent and office is:

Mitchell Denker 5836 SE Lillian Cir

Belleview, FL 34420

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.

Mitchell Denker

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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