POPOS PRANSMITTAL LETTER 98493

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

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SUBJECT:	T SIMPKINS	COMPANY ENAME – <u>MUST INCLUDE SU</u>	50 S	
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	Filing Fee Fili & Certified Copy Cer		
FROM: SARY T. SIMPKINS Name (Printed or typed) 4019 CARTER CREEK DRIVE				
	AVON PARK.	ddress F2A, 33825 State & Zip		
863 - 47/- 34/3 Daytime Telephone number				

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	02 TAL
ARTICLE I NAME The name of the corporation shall be:	ECRE]
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G T SIMPKINS COMPANY	ASSEE I
ARTICLE II PRINCIPAL OFFICE	F SI 0
The principal place of business/mailing address is: 4019 CARTER CREEK DRIVE	- SE
AVON PARK, PLA. 33825	A
ARTICLE III PURPOSE	·
The purpose for which the corporation is organized is:	: <u>-</u>
MANAGEMENT ADVISORY SERVICES	
ARTICLE IV SHARES	
The number of shares of stock is:	1600
5000 SHARKS OF COMMON STOCK AT \$1 PA	7/2
ARTICLE V INITIAL OFFICERS DIRECTORS (optional)	e e e e e e e e
The name(s) and address(es): GARY T. SIMPKINS - PRESIDENT & DIRECTO	'R
CAOU - SUMOVING - TOBASURES & DIRECTO	
SUSAN S. SIMPKINS - SKERRITARY & DIRECTOR	2
ARTICLE VI REGISTERED AGENT	-
The name and Florida street address of the registered agent is:	
GARY T. SIMPKINS	
4019 CARTER CREEK DRIVE	
AVON PARK, RA. 33825	, '
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
GARY T. SIMPKINS	
4019 CARTER CREEK DRIVE	
NON PARK, PLA. 33825	-
Having been named as registered agent to accept service of process for the above stated corporation at the pla	************** ace designated in this
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	
Con t. Amob '	12
Signature/Registered Agent Date	<u> </u>
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10 pho 9/5/	02
Signature/Incorporator Date	