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SECRETARY OF STATE

SALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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Note: Additional copy of articles is needed only when certified copy is requested.

(941) 475-7617 Telephone Number

ARTICLES OF INCORPORATION OF McCallister LP Service, Inc

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s), the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

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McCallister LP Service, Inc.

ARTICLE II PRINCIPLE OFFICE

9157 Cherry Drive Englewood, Florida 34224

ARTICLE III CAPITAL STOCK

One Thousand (1000) Shares

ARTICLE IV INITIAL REGISTERED AGENT

The name and address of the initial registered agent shall be:

John P. Izzo 773 So. Indiana Avenue Englewood, Florida 34223 SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATORS

The name(s) and street address(es) of the incorporator(s) to theses Articles of Incorporation is (are):

William B. McCallister IV 9157 Cherry Drive Englewood, Florida 34224

Arthur G. Pack Jr. 9172 Cherry Drive Englewood, Florida 34224

William B. McCallister, President & Treasurer

Arthur G. Pack Jr, V. Pres & Secretary

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 agent/registered office in the State of Florida:

1. The name of the corporation is:

McCallister LP Service, Inc.

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

John P. Izzo 773 So. Indiana Avenue Englewood, Florida 34223

Signature William BM Whates It

Title: President

Dated: 11-7-62, 2002

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 PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature:

REGISTERED AGENT FILING FEE: \$ 35.00