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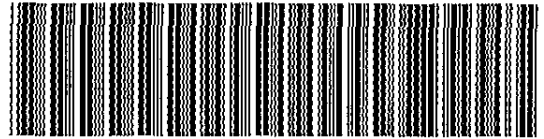
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Thomas W. Ruggles, P.A.

Attorney and Counselor at Law
603 Indian Rocks Road
Belleair, FL 33756-2056

(727) 461-0420

Fax: (727) 461-5655

January 15, 2003

VIA FEDERAL EXPRESS

Florida Secretary of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

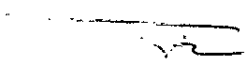
**RE: ARTICLES OF INCORPORATION OF
WILLIAM A. EDWARDS, INC.**

Dear Sir or Madam:

I am enclosing, in duplicate, an original set of Articles of Incorporation of **WILLIAM A. EDWARDS, INC.**, as well as a check in the amount of **\$70.00** for the filing fee.

In the event of any questions, please call.

Very truly yours,



THOMAS W. RUGGLES

TWR/da
Enc.

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ARTICLES OF INCORPORATION

OF

WILLIAM A. EDWARDS, INC.

The undersigned incorporator to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I

Name of Corporation

The name of the corporation shall be:

WILLIAM A. EDWARDS, INC.

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ARTICLE II

Purpose

The general nature of the business to be transacted by this corporation is to acquire, own and operate a commercial business enterprise and to perform any other activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE III

Principal Office

The initial street address in this state of the principal office of this corporation is:

603 Indian Rocks Road, Belleair, FL 33756. The corporation may from time to time move the principal office to any other address in Florida, and may establish branch offices at such other places within or without the State of Florida as may be determined and deemed expedient.

ARTICLE IV
Capital Stock

The maximum number of shares the corporation is authorized to have outstanding at any one time is: 100 shares of Five Dollar (\$5.00) par value all of which shall have the same rights and privileges.

ARTICLE V
Term of Existence

This corporation is to exist perpetually.

ARTICLE VI
Directors

This corporation shall have one (1) director initially. The number of directors may be either increased or diminished from time to time by the bylaws but shall never be less than one. The name and address of the initial director of this corporation is:

THOMAS W. RUGGLES
603 Indian Rocks Road
Belleair, FL 33756

ARTICLE VII
Incorporator

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

THOMAS W. RUGGLES
603 Indian Rocks Road
Belleair, FL 33756

ARTICLE VIII
Designation of Registered Agent

The initial designation of the Registered Office of this corporation shall be 603 Indian Rocks Road, Belleair, FL 33756, and the Registered Agent shall be **THOMAS W. RUGGLES** to accept service of process within this State until changed according to law.

ARTICLE IX
Commencement of Corporate Existence

The date that corporate existence shall begin shall be the date of the filing of these Articles of Incorporation with the State of Florida.

IN WITNESS WHEREOF, the incorporator above named, has hereunto set his hand and seal this 15th day of January, 2003.



THOMAS W. RUGGLES

STATE OF FLORIDA }
COUNTY OF PINELLAS }

The foregoing document was acknowledged before me on the 15th day of January, 2003 by **THOMAS W. RUGGLES**, who: ☒ is personally known to me, or ☐ is not personally known to me, who produced _____ as identification.

NOTARY PUBLIC



Diane F. Aaronson
MY COMMISSION # CCB74035 EXPIRES
October 3, 2003
BONDED THRU TROY FAIR INSURANCE, INC.

Diane F. Aaronson

State of Florida at Large
Commission Number & Expiration Date:

ACCEPTANCE OF REGISTERED AGENT

THOMAS W. RUGGLES does hereby accept the designation of Registered Agent and states that he is familiar with, and accepts, the obligations provided for in 607.0505, Florida Statutes.

DATED this 15th day of January, 2003.

Thomas W. Ruggles
THOMAS W. RUGGLES

STATE OF FLORIDA }
COUNTY OF PINELLAS }

The foregoing document was acknowledged before me on the 15th day of January, 2003 by **THOMAS W. RUGGLES**, who: ☒ is personally known to me, or ☐ is not personally known to me, who produced _____ as identification.

NOTARY PUBLIC

Diane F. Aaronson

State of Florida at Large
Commission Number & Expiration Date:



Diane F. Aaronson
MY COMMISSION # CCB74035 EXPIRES
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