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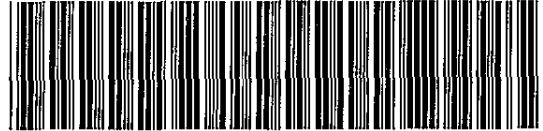
(Business Entity Name)

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CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 980564 8750A

AUTHORIZATION :

Patricia Pizito

COST LIMIT : \$ 78.75

ORDER DATE : March 24, 2003

ORDER TIME : 2:25 PM

ORDER NO. : 980564-005

CUSTOMER NO: 8750A

CUSTOMER: Ms. Lynn Ayers
William R. Herrman, Esq.

Suite 1705
445 Douglas Avenue
Altamonte Sprin, FL 32714

DOMESTIC FILING

NAME: WARLOCKS M.C. OF SEMINOLE
COUNTY, FLORIDA, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Kimberly Moret - EXT. 1149

EXAMINER'S INITIALS: _____

ARTICLES OF INCORPORATION

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:

Warlocks m.c. of Seminole County, Florida, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1560 Hilltop Road
Casselberry, Florida 32707

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 shares at par value \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

William R. Herrman, Esquire
445 Douglas Avenue
Suite 1705
Altamonte Springs, Florida 32714

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ARTICLE V INCORPORATOR(S)

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

William R. Herrman
445 Douglas Avenue
Suite 1705
Altamonte Springs, Florida 32714

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
12th day of March, 2003.


Signature

Signature

Signature

CERTIFICATE OF DESIGNATION OF
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.

1. The name of the corporation is: Warlocks m.c. of Seminole County, Florida, Inc.
2. The name and address of the registered agent and office is:

William R. Herrman, Esquire
(NAME)

445 Douglas Avenue, Suite 1705
(P.O. BOX or MAIL DROP BOX NOT ACCEPTABLE)

Altamonte Springs, Florida 32714
(CITY/STATE/ZIP)

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.



(Signature)

3-19-03

(Date)

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