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03 JUN 30 PM 3:48  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

✓

**TRANSMITTAL LETTER**

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

**SUBJECT: M. DOVERSPIKE MANAGEMENT, INC.**

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

**\$ 78.75 payable to "Department of State"**

for

**Filing Fee & Certificate of Status**

From: **MONTEE A. DOVERSPIKE  
5125 CASTELLO DRIVE  
NAPLES, FLORIDA 34103  
(703) 749-9416**

**FILED**

**ARTICLES OF INCORPORATION**

**03 JUN 30 PM 3:48**

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. TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

**M. DOVERSPIKE MANAGEMENT, INC.**

**ARTICLE II PRINCIPAL OFFICE**

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

**5125 CASTELLO DRIVE  
NAPLES, FLORIDA 34103**

**ARTICLE III SHARES**

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

**5000 Shares - No Par Common Value**

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

**MONTEE A. DOVERSPIKE  
5125 CASTELLO DRIVE  
NAPLES, FLORIDA 34103**

**ARTICLE V PURPOSE**

The purpose for which the corporation is organized is:

**CONSULTING SERVICES**

**ARTICLE VI INCORPORATORS**

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

**MONTEE A. DOVERSPIKE, PRESIDENT  
12625 GLEN ROAD  
POTOMAC, MD 20854**

**BRIDGETTE R. DAVIS, SECRETARY  
12625 GLEN ROAD  
POTOMAC, MD 20854**

The undersigned incorporator(s) has(have) executed these articles of Incorporation this

26<sup>th</sup> day of JUNE, 2003.

Monte A. Dovespike, President  
Signature and Title

6/26/2003  
Date

Bridgette R. Davis, Secretary  
Signature and Title

6/26/03  
Date

**FILED**

**03 JUN 30 PM 3:48**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Section 607.0501 or 617.0501, 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:

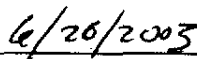
**M. DOVERSPIKE MANAGEMENT, INC.**

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

**MONTEE A. DOVERSPIKE  
5125 CASTELLO DRIVE  
NAPLES, FLORIDA 34103**

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

  
Date