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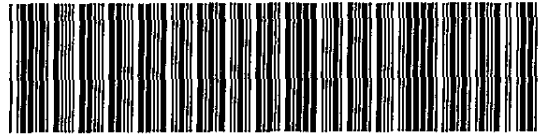
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**EFFECTIVE DATE**

1-1-04

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03 NOV -3 PM 5:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11-6-03  
[Signature]

## TRANSMITTAL LETTER

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

SUBJECT: Groves Services, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

FROM: David M. Groves  
Name (Printed or typed)

3397 Tropicaire Boulevard  
Address

North Port, Florida 34286  
City, State & Zip

941 426-5960  
Daytime Telephone number

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

**EFFECTIVE DATE**

1-1-04

**ARTICLES OF INCORPORATION**

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OF

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**GROVES SERVICES, INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, does hereby sign and direct these articles to be delivered to the Department of State, State of Florida for the purpose of forming a corporation under the laws of the State of Florida.

**ARTICLE I - NAME**

The name of this corporation is Groves Services, Inc. and their principal address is 3397 Tropicair Boulevard, North Port, Florida 34286.

**ARTICLE II - DURATION OF CORPORATE EXISTENCE**

This corporation shall exist perpetually.

**ARTICLE III - PURPOSES**

The general purposes for which this corporation is organized include the transaction of any or all lawful business for which corporations may be incorporated under the provisions of Chapter 607, Florida Statutes, as the same now exists or as it may hereafter be changed.

**ARTICLE IV - CAPITAL STOCK**

The aggregate number of shares of stock this corporation is authorized to have outstanding at any time is 100 shares of common stock having a par value of \$1.00 per share. There shall be no other type or class of stock.

**ARTICLE V - ADDRESS AND REGISTERED AGENT**

The street address of the initial registered office of this corporation shall be 3397 Tropicair Boulevard, North Port, Florida 34286. The name of the initial registered agent at such address is David M. Groves.

#### ARTICLE VI - DIRECTORS

This corporation shall have one director initially. The number of directors may be increased or decreased from time to time by bylaws adopted by the shareholders, but shall never be less than one nor more than seven.

#### ARTICLE VII - INITIAL OFFICERS/DIRECTORS

The name, titles and post office address of the initial officers is:

<u>NAME</u>	<u>ADDRESS</u>
David M. Groves President, Treasurer & Director	3397 Tropicaire Boulevard, North Port, Florida 34286

#### ARTICLES VIII - INCORPORATOR

The name and post office address of the incorporator of this corporation is:

<u>NAME</u>	<u>ADDRESS</u>
David M. Groves	3397 Tropicaire Boulevard, North Port, Florida 34286

#### ARTICLES X - EFFECTIVE DATE

The effective date of this corporation is January 1, 2004.

#### ARTICLE XI - AMENDMENT

These Articles of Incorporation may be amended in the manner provide by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders and approved at a stockholders' meeting by a majority of the stock entitled to vote thereon, unless all the directors and all the stockholders sign a written statement manifesting their intention that a certain amendment to these Articles of Incorporation be made.

IN WITNESS WHEREOF, the undersigned has hereunto  
subscribed his name and affixed his signature this  
28<sup>th</sup> day of October, 2003.

Witnesses:

Lein Foon

David M. Groves

David M. Groves

Sylvia M. Maher

STATE OF FLORIDA:

COUNTY OF SARASOTA:

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared DAVID M. GROVES to me know to be the person described as incorporator or who executed the foregoing Articles of Incorporation, and he acknowledged that he executed the same for the purposes therein stated and did not take an oath.

WITNESS my hand and official seal in the State and County aforesaid this 28 day of October, 2003.

NOTARY PUBLIC:

Janet J. Shriver  
Signature

JANET J SHRIVER  
Print Name

(Seal)



Janet J. Shriver  
Commission # DD 023435  
Expires May 7, 2005  
Bonded Thru  
Atlantic Bonding Co., Inc.

May 7, 2005  
Commission Expires

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE DESIGNATING A REGISTERED AGENT AND  
REGISTERED OFFICE FOR THE SERVICE OF PROCESS**

In compliance with Section 48.091, Florida Statute, the follow is submitted:

GROVES SERVICES, INC., desiring to organize under the laws of the State of Florida with its principal office, as indicated in the articles of incorporation at 3397 Tropicair Boulevard, County of Sarasota, State of Florida, has designated DAVID M. GROVES, whose street address is 3397 Tropicair Boulevard, County of Sarasota, State of Florida 34286, as its agent to accept service of process within this state.

**GROVES SERVICES, INC.**

**ACCEPTANCE**

Having been designated as agent to accept service of process for the above named corporation, at the place stated in this certificate, I hereby agree to act in this capacity and to comply with the provision of said law relative to same.



David M. Groves