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(Requestor's Name)			
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PICK-UP	WAIT	MAIL	
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Certified Copies	 Certificates 	of Status	
Special Instructions to F			
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Office Use Only



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SECRETARY OF STATE

W03-36966

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	s	· · · · · · · · · · · · · · · · · · ·			
SUBJECT: MCDA	NIEL ASSOCIATES (PROPOSED CORPORA	<u>INCORPORATED</u> TE NAME – <u>MUST INCLUI</u>	DE 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: JAMES A. HICKMAN, AGENT Name (Printed or typed)					
220 GOVERNMENT STREET, STE 1 Address					
NICEVILLE, FL 32578 City, State & Zip					
.850=729=8585 Daytime Telephone number					

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



December 24, 2003

JAMES A. HICKMAN 220 GOVERNEMENT ST, STE 1 NICEVILLE, FL 32578

SUBJECT: MCDANIEL ASSOCIATES INCORPORATED

Ref. Number: W03000039317

We have received your document for MCDANIEL ASSOCIATES INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6930.

Donna Graves Document Specialist New Filings Section

Letter Number: 803A00068696

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

MCDANIEL ASSOCIATES OF NWFL INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

P O BOX 534 VALPARAISO FL32580

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

ENGAGE IN GENERAL BUSINESS FOR A PROFIT.

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES NO PAR VALUE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

368 WASHINGTON AVE VALPARAISO FL 32580 DONALD W MCDANIEL

REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is:

220 GOVERNMENT STREET STE 1 NICEVILLE FL 32578 JAMES A HICKMAN

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DONALD W MCDANIEL 368 WASHINGTON AVE VALPARAISO FL 32580

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Incorporator

NOV L Date

NOV 0 4 2003

Date

G G

Signature/Registered Agent