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DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Cliff Hartman Enterprises

Signature _____

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ARTICLES OF INCORPORATION
OF
CLIFF HARTMAN ENTERPRISES, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I: Name

The name of this corporation is:

CLIFF HARTMAN ENTERPRISES, INC.

ARTICLE II: Principal Office

The principal place of business and mailing address of this corporation shall be:
5621 PINNACLE HEIGHTS CIRCLE
Suite 105
TAMPA, FL 33624

ARTICLE III: Capital Stock

The maximum number of shares of stock that this corporation is authorized to have outstanding any time shall consist of 10,000 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV: Initial Registered Agent and Street Address

The name and address of the initial registered agent is:

CLIFFORD G. HARTMAN
5621 PINNACLE HEIGHTS CIRCLE
Suite 105
TAMPA, FL 33624

ARTICLE V: Incorporator

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

CLIFFORD G. HARTMAN
5621 PINNACLE HEIGHTS CIRCLE
Suite 105
TAMPA, FL 33624

The undersigned incorporator has executed these Articles of Incorporation this 5TH day of January 5, 2004.


(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:

CLIFF HARTMAN ENTERPRISES, INC.

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

CLIFFORD G. HARTMAN
5621 PINNACLE HEIGHTS CIRCLE
Suite 105
TAMPA, FL 33624

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

1/5/04
Date

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