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TALLAHASSEE, FLORIDA

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[Handwritten signature and date 3/15/04]

ABACUS Accounting & Tax Service, Inc.

P.O. Box 1239 • Ocala, Florida 34478-1239

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Ocala Office
(352) 867-5005
704 S.W. 3rd Avenue

Dunnellon Office
(352) 489-9056

March 3, 2004

DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314

RE: Robert L. Troike, P.A.

Enclosed herewith are the Articles of Incorporation
together with a copy of said articles of Robert L. Troike,
P.A.

Our check in the amount of \$ 87.50 includes payment for the
following:

Filing Fees
Charter Tax
Registered Agent
Certified Copy

Respectfully submitted,



Richard M. Sandy

On behalf of Robert L. Troike, P.A.

CERTIFICATE OF INCORPORATION
Of
Robert L. Troike, P.A.

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WE, THE UNDERSIGNED, hereby associate ourselves together for the purpose of becoming a corporation under the Laws of the State of Florida, by and under the provisions of the Statutes of the said State of Florida.

ARTICLE I

The name of this corporation shall be:
Robert L. Troike, P.A.

ARTICLE II

The corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida. Notwithstanding the foregoing, the professional association will provide patent attorney services.

ARTICLE III

The maximum number of shares of capital stock that this corporation is authorized to have outstanding at any one time is ONE THOUSAND (1,000) shares of common stock, having a par value of ONE (\$1.00) DOLLAR per share.

ARTICLE IV

The amount of capital with which this corporation will begin business shall be the sum of not less than One hundred (\$100.00) DOLLARS.

ARTICLE V

This corporation shall exist perpetually unless sooner dissolved according to law.

ARTICLE VI

This initial street address of the principal office of the corporation shall be:

13710 SE 87th Avenue
Summerfield, FL 34491

ARTICLE VII

The number of Directors of this corporation shall be at least ONE (1) and no more than FIVE (5).

ARTICLE VIII

The name and addresses of the members of the first Board of Directors of this corporation are as follows:

Robert L. Troike 13710 SE 87th Avenue
Summerfield, FL 34491

Bette C. Troike 13710 SE 87th Avenue
Summerfield, FL 34491

ARTICLE IX

The names and addresses of the persons signing these Articles of Incorporation as subscribers is as follows:

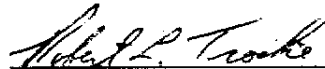
Robert L. Troike 13710 SE 87th Avenue
Summerfield, FL 34491

Bette C. Troike 13710 SE 87th Avenue
Summerfield, FL 34491

ARTICLE X

The corporate existence of this corporation shall begin on the date the Articles of Incorporation are filed of record.

IN WITNESS WHEREOF, the undersigned Robert L. Troike & Bette C. Troike, and being natural persons competent to contract, has hereunto set their hand and seal this 5 day of March, 2004.


Robert L. Troike

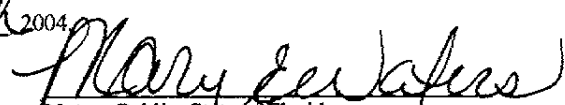

Bette C. Troike

STATE OF FLORIDA

COUNTY OF MARION

BEFORE ME, appeared Robert L. Troike & Bette C. Troike to me well known and known to me to be the individuals described in and who executed the foregoing Articles of Incorporation, and they acknowledged before me that they executed same freely and voluntarily for the purpose herein expressed.

WITNESS my hand and official seal this 5 day of March, 2004.


Notary Public, State of Florida
My commission expires:



Mary E Waters
My Commission DD217127
Expires May 29, 2007

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS
WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 607.325, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST THAT **Robert L. Troike, P.A.**

WITH ITS PLACE OF BUSINESS AT **13710 SE 87th Avenue**

HAS NAMED **Bette C. Troike**

LOCATED AT **13710 SE 87th Avenue**

CITY OF **Summerfield**, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF
PROCESS WITHIN FLORIDA.

SIGNATURE *Robert L. Troike*
Robert L. Troike

TITLE **President**

DATE *3/5/04*

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED
CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT
IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL
STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I
ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE *Bette C. Troike*
Bette C. Troike

DATE *3/5/04*

BUREAU OF CORPORATE RECORDS, PO BOX 6327, TALLAHASSEE, FLORIDA 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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