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CAPITAL CONNECTION, INC.

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

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Technical Specialties of North Flonda Inc	·
	Art of Inc. File
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	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy 2
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
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Signature	Fictitious Owner Search
Signature -	Vehicle Search
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ARTICLES OF INCORPORATION

OF

Technical Specialties of North Florida, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is Technical Specialties of North Florida, Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation 174 S.W. Meridian Court, Fort White, Florida 32038.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one-thousand (1,000) shares having a par value of one-dollar (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Jonathan D. Smith, Esquire, 4542 Commercial Way, Spring Hill, FL 34606.

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: OFFICERS AND DIRECTORS

The name and address of Initial director of the corporation is Frank W. Ohidy, 174 S.W. Meridian Court, Fort White, Florida 32038.

The undersigned has executed these Articles of Incorporation this 15th day of March 2004.

"Capital Connection, Inc. by, Leilani White, Client Representative"

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statues, the mentioned 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: Technical Specialt	ies of
Nort	h Florida, Inc.	

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

Jonathan D. Smith, Esquire 4542 Commercial Way Spring Hill, Florida 34606

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.

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Charter No.