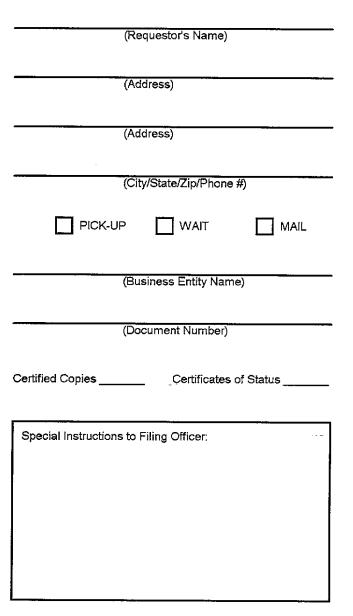
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VALIDATION

0 N L Y

Requestor's Name
Address
City State Zip Phone

CORPORATION(S) NAME

Vav/	$R_{\perp} \leq$	simpson and	Associates, Inc.
		,	,
(Profit () NonProfit) Amendment	() Merger
() Foreign	() Dissolution	() Mark
() Limited Partnership () Reinstatement	() Annual Report) Reservation	() Other () Change of Registered Agent
Certified Copy	() Photo Copies	() Certificate Under Seal
() Call When Ready (X) Walk In	(() Will Wait) Call If Problem (XX) Pick Up	() After 4:30 () Mail Out

Name
Availability

Document
Examiner

Updater

Verifier

Acknowledgment

W.P. Varifier



[All Elinpir C Toll Free: 1-800-432-3028

ARTICLES OF INCORPORATION of impson and Associates, Inc. The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida. ARTICLE I - CORPORATE NAME The name of the corporation is: aul R. Simpson and Associates ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law. ARTICLE III - PURPOSE The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida. ARTICLE IV- CAPITAL STOCK The corporation is authorized to issue One hondred shares (100) of one Dollar(s) (\$ _______) par value Common Stock, which shall be designated "Common Shares". ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is: 470 NW 102 Terrace ZIP 3302 Tines **FLORIDA** The principal office, if known, or the mailing address of the corporation is:

470 NW (02

Terrace

FLORIDA

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have(
increased or diminished from time to time by the By- of the initial director(s) of the corporation are as follo		ne names and addresses
NAME Paul R Simpson		
ADDRESS 470 NW 102 Terrac	e	
CITY Pembroke Pines	STATE Florida	ZIP 33026
NAME		
ADDRESS -		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
A DETAIL E	W. I. W.GODDODATODG	
ARTICLE	VI I - INCORPORATORS	
The names and addresses of the incorporators signing	these Articles of Incorporation are as follow	vs:
NAME Paul R Simpson		
ADDRESS 470 NW 102 Terrac	0	
CITY Pembroke Pines	STATE Florida	ZIP <i>3362</i>
NAME Data Simpson.	(DORA SIMPSO	
ADDRESS 470 NW 102 Terro		10-1
CITY Pombrole Pines	STATE Florida	ZIP <i>3302</i>
NAME		
ADDRESS		
CITY	STATE	ZIP
IN WITNESS WHEREOF, the undersigned subscribe day of April 2004	r(s) have executed these Articles of Incorpor	ration this ///
day of April 2004	\bigcirc	
	Stark impson	(Seal)
	Dan Singaro	
	1 / my cump son	(Seal)
		(Seal)

CERTIFICATE AND KNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

Paul	R Simpson	and	Associates	INC.	
(name of corporation)					

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 470 NW 102 Terrace	
Pembroke Pines, Fl 33026	
has named Paul R Simpson	
located at the aforesaid address, as its Registered Agent to accent service of process wi	ithiı

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.