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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)205-0381

From:
Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850)224-8870
Fax Number : (850)224-7047

FILED
04 MAY 27 AM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

Master Distributors, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	$78.75

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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:

Master Distributors, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Po Box 16525, Tampa, FL 33687-6525

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Tracy Crisp, P / T., Po Box 16525, Tampa, FL 33687-6525
Scott Tate, VP / S, Po Box 16525, Tampa, FL 33687-6525

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ARTICLE VI REGISTERED AGENT

The **name and Florida street address** of the registered agent is:

F. Tobias Tedrowe, Esquire
608 W Horatio St Ste B
Tampa 33606-2228

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is;

Tracy K. Crisp
Po Box 16525
Tampa, FL 33687-6525

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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/Registered Agent — Date: 05-27-04

Signature/Incorporator — Date: 5-27-4