CAPITAL CONNECT Florida Department of Star

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Fax Number : (850)205-0381

From:

Account Name

: YOUR CAPITAL CONNECTION, INC.

Account Number : 120000000257

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: (850)224-8870

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FLORIDA PROFIT CORPORATION OR P.A.

GARY CLIFTON ENTERPRISES, INC.

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Capital Connection, Inc.

CAPITAL CONNECTION 850 222 1222

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ARTICLES OF INCORPORATION **OF**

GARY CLIFTON ENTERPRISES, 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 GARY CLIFTON ENTERPRISES, INC.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 40434 County Road, Eustis, FL. 32736

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of (10.00) per share.

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ARTICLE IV: INITIAL REGISTERED AGENT AND **ADDRESS**

The name and address of the initial registered agent is Brenda H. Smith Esq., 59 N. Central Ave., Umatilla, FL. 32784

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 the initial officers and directors are Gary Clifton, President/Director and Karen Clifton, Vice President/Director.

The undersigned has executed these Articles of Incorporation this 4th day of June 2004.

"Capital Connection, Inc. by, Weimar Lopez, Client Representative"

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

The name of the corporation is:	GARY	CLIFTON	ENTERPRISES,	INC.
	· · · · ·			
		dered agent a	ınd office is:	
The name and street address of the Branch H. Smith b. 59 N. Sewhal Ave.	12 K.	itered agent a	und office is:	

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE 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.

Sum to Sant

SECRETARY OF SID

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