

Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**FLORIDA PROFIT CORPORATION OR P.A.**

**LARSON INVESTMENT, INC.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
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**ARTICLES OF INCORPORATION  
OF  
LARSON INVESTMENT, 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:

**LARSON INVESTMENT, INC.**

**ARTICLE II**

**PRINCIPAL OFFICE:** The principal place of business and mailing address of this corporation shall be:

**1450 Cass Rio Drive  
Orlando, Florida 32825-8203**

**ARTICLE III**

**SHARES:** The number of shares of stock that this corporation is authorized to have outstanding at any one time is One Hundred (100) shares.

**ARTICLE IV**

**INITIAL REGISTERED AGENT AND STREET ADDRESS:** The name and address of the initial registered agent is:

**Robert J. Larson  
1450 Cass Rio Drive  
Orlando, Florida 32825-8203**

**ARTICLE V**

**INCORPORATORS:** The name and street address of the incorporator to these Articles of Incorporation is:

Robert J. Larson  
1450 Cass Rio Drive  
Orlando, Florida 32825-8203

The undersigned incorporators have executed these Articles of Incorporation this 14th day of September, 2004.



Robert J. Larson

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Sections 607.0501 or 617.0501, Florida Statutes, the undersigned 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.

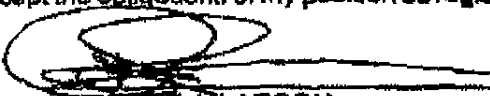
1. The name of the corporation is:

**LARSON INVESTMENT, INC.**

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

Robert J. Larson  
1450 Casa Rio Drive  
Orlando, Florida 32825-5203

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.

  
ROBERT J. LARSON

Date: 10/18/04

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