10:16 NO.538 01/04

04 NOV 10 AM 10: 57

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000224474 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : I20000000257

Fax Number

Phone : (850)224-8870 : (850)224~7047

## FLORIDA PROFIT CORPORATION OR P.A.

CROSS-MEMBER-SERVICES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Wanu

Comporate Filing

Public Access Halp.

Capital Connection, Inc.

OR 11/12

H04000224474

DIVISION OF CONTROL ATTLE

04 NOV 10 AM 10: 57

# ARTICLES OF INCORPORATION OF

## CROSS-MEMBER-SERVICES, 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 CROSS-MEMBER-SERVICES, INC.

#### ARTICLE II: PRINCIPAL OFFICE

The principal place of business is and mailing address of the corporation is 12604 Briermead Drive, Jacksonville, FL 32258.

#### 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 (\$10.00) per share.

H04000224474

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

The name and address of the initial registered agent is William L. Durden III, 1804 San Marco Place, Jacksonville, FL 32207.

#### ARTICLE V: INCORPORATOR

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

#### ARTICLE VI: OFFICERS AND DIRECTORS

The name and address of the initial Board of directors is President: Robert E. Sutton, Jr., CEO: Robert E. Sutton, Sr., 12604 Briermead Drive, Jacksonville, FL 32258.

#### **ARTICLE VII: INDEMNIFICATION**

The Corporation shall indemnify and may insure its officers and directors to the fullest extent permitted by law currently in effect or hereinafter enacted.

The undersigned has executed these Articles of Incorporation this 10<sup>th</sup> day of November 2004. Your Capital Connection, Inc., by Stacey Piland, Client Representative

H04000224474

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section organized under the laws of the stathe registered office/registered ages	te of Piorida nt. in the sta	a, subtrait ate of Fig	is the follow xida	ing staten	ent in d	oration, lesignat	ing	
1. The name of the corporation is:	CROSS-MEMBER-SERVICES, INC.					٠.		
		<del></del>				,	•	
		<del></del>	·					
			ş.		,		,	
2. The name and street address of	heregisters	of agent	and office is	<b>!</b>		<del>- :</del>	<del></del>	
WILLIAM L. DURDE	N 711		<del></del>		, 		<u>'</u>	
1804 SAN MARC	O. PLAC	CE	· · · · · · · · · · · · · · · · · · ·					
JACKSONVINE, F	LOPEO	<u> </u>	2207	<u></u>		<del></del>		

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.

Well De E

J. AM 10: 5