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Division of Corporations

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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

FLORIDA PROFIT CORPORATION OR P.A.

SHAVER-STRICKLAND, INC.

Certificate of Status	1
Certified Copy	1.
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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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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:

SHAVER-STRICKLAND, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1311 WINTER GARDEN-VINELAND ROAD WINTER GARDEN, FLORIDA 34787

ARTICLE HI PURPOSE

The purpose for which the corporation is organized is:

- 1. To manufacture, construct, purchase or otherwise acquire and to own, mortgage, pledge, sell, assign, transfer or otherwise dispose of, and to invest in, trade in, deal in and with products, good, wares, merchandise, real and personal property and services of every kind, class and description.
- 2. To transact any other lawful business for which corporation may be incorporated under the Florida General Corporation Act.
- 3. To do such other things as are incidental to foregoing or necessary or desirable in order to accomplish the foregoing.

ARTICLE IV SHARES

The number of shares of stock is:

1. The total number of shares of capital stock authorized to be issued by the corporation shall be 7,500 shares having a par value of \$1.00 per share. Each of the said shares of stock shall entitle the holder thereof to one (1) vote at any meeting of the stockholders. All or any part of said capital stock may be paid for in cash, in property or in labor or services at a fair valuation to be fixed by the Board of Directors at a meeting called for such purpose. All stocks when issued shall be paid for and shall be non-assessable.

ARTICLE Y INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):

ALBERT E. STRICKLAND, P/S/D 20736 CANOE CROSSING COURT CLERMONT, FLORIDA 34711 RON SHAVER, VP/D 11215 CROOKED RIVER COURT CLERMONT, FLORIDA 34711 H05000003281 3

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

PAMELA MILTON ROBB, ESQ 1311 WINTER GARDEN-VINELAND RD WINTER GARDEN, FLORIDA 34787

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PAMELA M. ROBB 1311 WINTER GARDEN-VINELAND RD WINTER GARDEN, FLORIDA 34787

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

Signature/Incorporator Date

DATE /05

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