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

From: Account Name : YOUR CAPITAL CONNECTION, INC.  
Account Number : T20000000257  
Phone : (850)224-8870  
Fax Number : (850)224-7047

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JAN 12 11:08:21  
DIVISION OF STATE  
CORPORATIONS  
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

Byrd & Gonzalez, P.A.

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**ARTICLES OF INCORPORATION  
OF**

**Byrd and Gonzalez, P.A.**

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 **Byrd & Gonzalez, P.A.**

The specific nature of business of this professional association is the practice of law.

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2005 JAN 12 11 09 AM  
TALLAHASSEE, FLORIDA

**ARTICLE II: PRINCIPAL OFFICE**

The principal place of business is and mailing address of the corporation is **3825 Henderson Blvd., Suite 600, Tampa, FL 33629.**

**ARTICLE III: CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is ten thousand (10,000) shares having a par value of (\$1.00) per share.

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

The name and address of the initial registered agent is **Anthony J. Gonzalez, Jr., 3825 Henderson Blvd., Suite 600, Tampa, FL 33629.**

**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.**

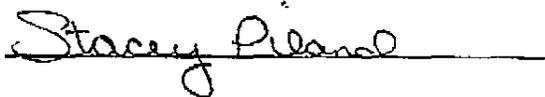
**ARTICLE VI: OFFICERS AND DIRECTORS**

The name and address of the initial Board of directors is **President: William W. Byrd, Vice-President: Anthony J. Gonzalez Jr., 3825 Henderson Blvd., Suite 600, Tampa, FL 33629.**

**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 12<sup>th</sup> day of January 2005. Your Capital Connection, Inc., by **Stacey Piland, Client Representative**



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CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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: Byrd and Gonzalez, P.A.

\_\_\_\_\_

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

ANTHONY J. GONZALEZ, JR

3825 HENDERSON BLVD., STE 600 TAMPA, FL 35629

HAVE 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.

