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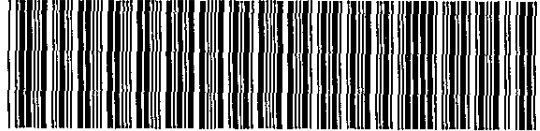
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DATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

2005 FEB 23 PM 12:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

*Russell Wade, Inc.*

Signature \_\_\_\_\_

Requested by: *WC*

Date *2/23*

Time *11:00*

Name \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

- ☒ Art of Inc. File \_\_\_\_\_
- \_\_\_\_\_ LTD Partnership File \_\_\_\_\_
- \_\_\_\_\_ Foreign Corp. File \_\_\_\_\_
- \_\_\_\_\_ L.C. File \_\_\_\_\_
- \_\_\_\_\_ Fictitious Name File \_\_\_\_\_
- \_\_\_\_\_ Trade/Service Mark \_\_\_\_\_
- \_\_\_\_\_ Merger File \_\_\_\_\_
- \_\_\_\_\_ Art. of Amend. File \_\_\_\_\_
- \_\_\_\_\_ RA Resignation \_\_\_\_\_
- \_\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_
- \_\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_
- ☒ Cert. Copy \_\_\_\_\_
- \_\_\_\_\_ Photo Copy \_\_\_\_\_
- \_\_\_\_\_ Certificate of Good Standing \_\_\_\_\_
- \_\_\_\_\_ Certificate of Status \_\_\_\_\_
- \_\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_
- \_\_\_\_\_ Corp Record Search \_\_\_\_\_
- \_\_\_\_\_ Officer Search \_\_\_\_\_
- \_\_\_\_\_ Fictitious Search \_\_\_\_\_
- \_\_\_\_\_ Fictitious Owner Search \_\_\_\_\_
- \_\_\_\_\_ Vehicle Search \_\_\_\_\_
- \_\_\_\_\_ Driving Record \_\_\_\_\_
- \_\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_
- \_\_\_\_\_ UCC 11 Search \_\_\_\_\_
- \_\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_
- \_\_\_\_\_ Courier \_\_\_\_\_

**FILED**

**Articles of Incorporation  
of  
RUSSELL WADE, INC.**

2005 FEB 23 P 12: 25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - NAME**

The name of this corporation is **Russell Wade, Inc.**

**ARTICLE II - ADDRESS**

The principal place of business and mailing address of the corporation is 135 Wekiva Pointe Circle, Apopka, Florida 32712.

**ARTICLE III - DURATION**

This corporation shall exist perpetually.

**ARTICLE IV - PURPOSE**

This corporation is organized for the purpose of transacting any and all lawful business for which corporations may be incorporated under Chapter 607, Florida Statutes.

**ARTICLE V - CAPITAL STOCK**

This corporation is authorized to issue 1,000 shares of \$.10 par value common stock.

**ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of this corporation shall be:

301 East Pine Street  
Suite 1400  
Orlando, Florida 32801

The name of the initial registered agent of this corporation at that address shall be:

Gary S. Salzman

## **ARTICLE VII - INITIAL BOARD OF DIRECTORS AND OFFICERS**

A. This corporation shall have two (2) directors initially. The number of directors may be either increased or diminished from time to time by the Bylaws, but shall never be less than one (1).

B. The name and address of the initial directors and officers of this corporation are as follows:

<u>Name</u>	<u>Street Address</u>	<u>Office</u>
Michael W. Woodruff	135 Wekiva Pointe Circle Apopka, Florida 32712	Director President
Sheryle S. Woodruff	135 Wekiva Pointe Circle Apopka, Florida 32712	Director Vice President Secretary Treasurer

## **ARTICLE VIII - INCORPORATOR**

The name and address of the person signing these Articles is:

<u>Name</u>	<u>Street Address</u>
Sheryle S. Woodruff	135 Wekiva Pointe Circle Apopka, Florida 32712

## **ARTICLE IX - BYLAWS**

The power to adopt, alter, amend or repeal Bylaws shall be vested in the shareholders.

## **ARTICLE X - AMENDMENT**

The provisions contained in these Articles of Incorporation, or any amendment hereto, may be amended or repealed by the shareholders of the Corporation.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 21 day of February, 2005.

  
SHERYLE S. WOODRUFF, Incorporator


STATE OF FLORIDA  
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 21 day of February, 2005, by Sheryle S. Woodruff.



Cynthia L. Garner  
MY COMMISSION # DD183341 EXPIRES  
February 28, 2007  
BONDED THRU TROY FAHN INSURANCE, INC.

AFFIX NOTARY STAMP

  
Signature of Notary Public  
CYNTHIA L. GARNER  
(Print Notary Name)  
My Commission Expires: 2/28/07  
Commission No.: \_\_\_\_\_

☒ Personally known, or  
☐ Produced Identification  
Type of Identification Produced: \_\_\_\_\_

**CERTIFICATE OF ACCEPTANCE AS REGISTERED AGENT**

Having been named as the registered agent in the Articles of Incorporation of **Russell Wade, Inc.**, I hereby accept and agree to act in this capacity.

Dated: February 21, 2005.



GARY S. SALZMAN

# 358981 v1

**FILED**

2005 FEB 23 P 12:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA