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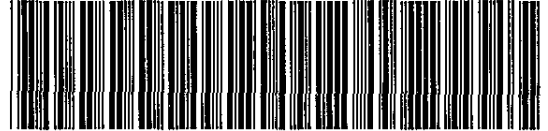
(Business Entity Name)

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CAPITAL CONNECTION, INC.

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

Shirley A. Carter
Ministries, Inc.

- 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 _____
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- 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 _____

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Signature _____

Requested by: *WC*

Name _____

Date *3/31*

Time *11:00*

Walk-In _____

Will Pick Up _____

ARTICLES OF INCORPORATION
OF
SHIRLEY A. CARTER MINISTRIES, INC.

The undersigned incorporator hereby forms a corporation under Chapter 607, Florida Statutes.

ARTICLE I
NAME

The name of this corporation is:

SHIRLEY A. CARTER MINISTRIES, INC.

ARTICLE II
GENERAL PURPOSE

The general purpose or purposes for which the corporation is organized is the transaction of any or all lawful business for which corporations may be incorporated under Chapter 607, Florida Statutes.

ARTICLE III
CAPITAL STOCK

The aggregate number of shares of stock which the corporation shall have authority to issue is 750 shares of common stock, having a par value of \$10.00 per share.

ARTICLE IV
ADDRESS OF INITIAL REGISTERED OFFICE, PRINCIPAL OFFICE AND
NAME OF INITIAL REGISTERED AGENT

The initial registered office and principal office of this corporation and the name of its initial registered agent at such address are:

SHIRLEY A. CARTER
241 Montclair Road
Leesburg, Florida 34748

ARTICLE V

Pursuant to the provisions of Section 607.111, Florida Statutes, the business of the Corporation shall be managed by the stockholders of the Corporation, rather than by a Board of Directors.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

SHIRLEY A. CARTER MINISTRIES, INC.

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

Shirley A. Carter
241 Montclair Road
Leesburg, Florida 34748

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.

Dated this 26 day of March, 2005.


SHIRLEY A. CARTER

ARTICLE VI
INCORPORATOR AND OFFICERS

The names and addresses of the incorporators and the initial officers are:

Name & Address

Office

SHIRLEY A. CARTER
241 Montclair Road
Leesburg, Florida 34748

President, Secretary &
Treasurer

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 30th day of March, 2005.

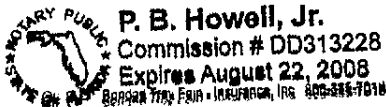

SHIRLEY A. CARTER, Incorporator
(also as Resident Agent)

STATE OF FLORIDA
COUNTY OF LAKE

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the state and county aforesaid to take acknowledgments, personally appeared SHIRLEY A. CARTER, personally known to me, and to me known to be the person described as the incorporator in and who executed the foregoing Articles Of Incorporation, and she acknowledged before me that she executed the said Articles Of Incorporation.

WITNESS my hand and official seal in the county and state last aforesaid, this 30th day of March, 2005.


NOTARY PUBLIC.



Notary Seal/Stamp &
Commission Expiration Date:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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