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U.S. DEPARTMENT OF COMMERCE

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06 MAR 22 PM 2:22
TALLAHASSEE, FLORIDA

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LAW OFFICES
MARTIN SACK, JR.

2064 PARK STREET
JACKSONVILLE, FLORIDA 32204
TELEPHONE (904) 387-0085
FAX (904) 384-0664

March 21, 2006

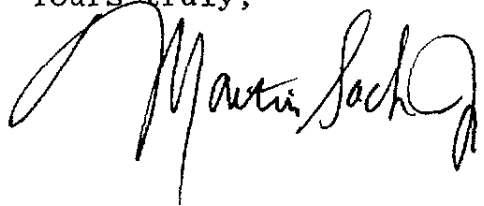
Division of Corporations
Florida Department of State
Post Office Box 6327
Tallahassee, Florida 32314

Gentlemen:

I enclose for filing Articles of Incorporation and Designation of Registered Agent of **SCHMID MANAGEMENT GROUP, INC.**, together with check to your order in the sum of \$70.00 as follows:

Filing Articles of Incorporation	\$35.00
Filing of Designation of Registered Agent	<u>\$35.00</u>
	\$70.00

Yours truly,



MSjr/hl
Enclosures

cc: Schmid Management Group, Inc.
76456 Longleaf Loop
Yulee, Florida 32097

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ARTICLES OF INCORPORATION
OF
SCHMID MANAGEMENT GROUP, INC.

I

The name of the corporation is:
Schmid Management Group, Inc.

II

The principal office, or the mailing address of the corporation is:
76456 Longleaf Loop, Yulee, Florida 32097

III

The number of shares the corporation is authorized to issue is:
10,000 shares, common stock, par value \$1.00 per share

IV

The street address of the corporation's initial registered office and
the name of its initial registered agent at that office is:


Kristopher W. Schmid, 76456 Longleaf Loop, Yulee,
Florida 32097

V

The name and address of each incorporator ~~xxx~~ and initial director
is:

Kristopher W. Schmid, 76456 Longleaf Loop,
Yulee, Florida 32097

EFFECTIVE DATE OF BEGINNING OF CORPORATE EXISTENCE: On filing


Kristopher W. Schmid - Incorporator
and Initial Director

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TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, 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: _____
Schmid Management Group, Inc.

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

Kristopher W. Schmid
(NAME)

76456 Longleaf Loop
(P.O. BOX NOT ACCEPTABLE)

Yulee, Florida 32097
(CITY/STATE/ZIP)

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SIGNATURE Kristopher W. Schmid
(corporate officer)

TITLE President

DATE March 21, 2006

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.

SIGNATURE Kristopher W. Schmid

DATE March 21, 2006