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Tallaline, 7l. 3230 (City/State/Zip/Phone #)
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ARTICLES OF INCORPORATION

ARTICLE I: NAME

The name of the corporation shall be:

Cummings & Hobbs, P.A.

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ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

462 W. Brevard Street Tallahassee, Florida 32301

ARTICLE III: SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

2 Shares

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial Registered Agent is:

Barbara K. Hobbs %Leon County Courthouse 301 South Monroe St. Tallahassee, FL 32301

ARTICLE V: INCORPORATOR(S)

The name and street address of the incorporators to these Articles of Incorporation are:

Barbara K. Hobbs %Leon County Courthouse 301 South Monroe St. Tallahassee, FL 32301 PRESIDENT

Carolyn D. Cummings 5005 Touraine Drive Tallahassee, Florida 32308 **VICE-PRESIDENT**

Carolyn D. Cummings 5005 Touraine Drive Tallahassee, Florida 32308

SECRETARY/TREASURER

PURPOSE

This corporation is being formed as a law firm.

The undersigned incorporators have executed these Articles of Incorporation this 17th day of August, 2006.

Barbara K. Hobbs

Carolyn D. Cummings

8/17/06

Signature

nature

CERTIFICATE OF DESIGNATION OF 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: Cummings & Hobbs, P.A.
- 2. The name and address of the Registered Agent and office is:

Carolyn D. Cummings 5005 Touraine Drive Tallahassee, Florida 32308

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.

istered Agent