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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : I20000000257 Phone : (850)224-8870 Fax Number : (850)224-7047

FLORIDA PROFIT/NON PROFIT CORPORATION

C&M Intergrations, Inc.

Certificate of Status	0
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ARTICLES OF INCORPORATION

OF

C&M Integrations, Inc.

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 C&M Integrations, Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 724 Bay Street NE, St. Petersburg, FL 33701

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having no par value per share.

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ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Patrick B. Calcutt, Esq., 165 5th Ave, NE, St. Petersburg, FL 33701

ARTICLE V: OFFICERS & DIRECTORS

The name and address of the initial Officers and Directors of the corporation are:

Heidi Culbertson, President/Treasurer/Secretary/Director, 724 Bay Street NE, St. Petersburg,
FL 33701

Jessica Means, Vice President/Director, 428 Robin Road, Chapel Hill, NC 37516

ARTICLE VI: 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.

The undersigned has executed these Articles of Incorporation this 11th day of January 2007.

"Your Capital Connection. Inc. by. Weimar Lopez. Client Representative"

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section organized under the laws of the stat the registered office/registered ager	e of Florida	, submit	ts the follo	wing states	nent in designating
The name of the corporation is:_	C & 1	M _	Inte	gratio	ns, Inc.
2. The name and street address of t	ha revigtare	1 agent	and office	: Pat	rick B.
Calcutt, Esq. St. Retersbor	, le	55	5th	Ave,	NE

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.