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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CSH SERVICES, LLC

Account Number : I2007000C160
Phone : (800)494-3124

Fax Number : (561) 455-9885

FLORIDA PROFIT/NON PROFIT CORPORATION

CLAN CASON, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

SECRETARY OF STATE

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

CLAN CASON, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6235 TOWNSEND ROAD
JACKSONVILLE, FLORIDA 32244

APR 10 A 10: 2

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,000 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is/are:

PRESIDENT, TREASURER
WANDA CASON
6235 TOWNSEND ROAD
JACKSONVILLE, FLORIDA 32244

VICE PRESIDENT, SECRETARY
DAVID CASON
6235 TOWNSEND ROAD
JACKSONVILLE, FLORIDA 32244

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ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

ALLEN L. POUCHER, JR., P.A. 2257 RIVERSIDE AVENUE JACKSONVILLE, FLORIDA 32204

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

ALLEN L. POUCHER, JR.
2257 RIVERSIDE AVENUE
JACKSONVILLE, FLORIDA 32204

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

ALLEN L. POUCHER, JR., P.A. Registered Agent

<u>4110109</u>

Date

ALLEN L. POUCHER, JR. /Incorporator

4/10/09 Date

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