

PID 0000 47328

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

OK per KB 6/4/10 daw

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FLORIDA PROFIT/NON PROFIT CORPORATION

Rockcastle Dist. Inc.

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

ROCKCASTLE DIST. INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6134 BAYOU GRANDE BLVD. NE
ST. PETERSBURG, FLORIDA 33703

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:

1,500 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:

PRESIDENT

STACY MURRAY

1436 JASMINE WAY

CLEARWATER, FLORIDA 33756

PRESIDENT

MIRIAM MULLEN

6134 BAYOU GRANDE BLVD. NE

ST. PETERSBURG, FLORIDA 33703

PAGE 2 ROCKCASTLE DIST. INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLE VI REGISTERED AGENT**

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

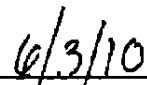
STACY MURRAY
1436 JASMINE WAY
CLEARWATER, FLORIDA 33756**ARTICLE VII INCORPORATOR**

The name and street address of the incorporator is:

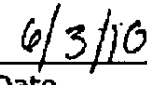
STACY MURRAY
1436 JASMINE WAY
CLEARWATER, FLORIDA 33756

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.



STACY MURRAY / Registered Agent

Date

STACY MURRAY / Incorporator

Date