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ARTICLES OF INCORPORATION

OF

CCAAT Corp.

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 CCAAT Corp.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 6226 E. Sligh Ave, Tampa, Fl, 33617-9105

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1000) shares having a par value of (\$1.00) per share.

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ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Michael H. Willison, 114 S. Lake Avenue, Lakeland, Fl. 33801.

ARTICLE V: 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.

ARTICLE VI: OFFICERS & DIRECTORS

The name and address of the initial Officers and Directors of the corporation is: James A. Horton, President/Director/Secretary, 6226 E. Sligh Ave, Tampa, Fl, 33617-9105

The undersigned has executed these Articles of Incorporation this 25th day of January 2012 "Your Capital Connection, Inc. by, Seth Neeley, Client Representative"



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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501. Florida Statutes, the mentioned Florida for profit corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered agent and registered office, in the state of Florida.

1. The name of the company is: CCAAT Corp.

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

Michael H. Willison 114 S. Lake Avenue Lakeland, FL 33801

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HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED COMPANY 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.

Michael H. Willison P.A. 114 S. Lake Ave. Lekeland, FL 33801