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Florida Department of State
Division of Corporations
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To:
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        Division of Corporations
        Fax Number       : (850)617-6381
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From:
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        Account Name     : SHUMAKER, LOOP & KENDRICK LLP
        Account Number   : 075500004387
        Phone            : (813)229-7600
        Fax Number       : (813)229-1660
```

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
Central FOC, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	$70.00

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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: Central FOC, Inc.

ARTICLE II   PRINCIPAL OFFICE

Principal **street** address	Mailing address, if different is:
1800 S. Harden Blvd.	
Lakeland, FL 33803	

ARTICLE III   PURPOSE
The purpose for which the corporation is organized is: _____

To engage in any business permitted by law.

ARTICLE IV   SHARES
The number of shares of stock is: 1,000

ARTICLE V   INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Frank J. Fore, Jr., Pres., Sec., Treas., Dir.   Name and Title:_____

Address   1800 S. Harden Blvd.   Address:_____

            Lakeland, FL 33803

Name and Title:_____   Name and Title:_____

Address _____   Address:_____

Name and Title:_____   Name and Title:_____

Address _____   Address:_____

Name and Title:_____ Name and Title:_____

Address   _____ Address: _____

              _____   _____

              _____   _____

ARTICLE VI   REGISTERED AGENT
The *name and Florida street address* (P.O. Box NOT acceptable) of the registered agent is:

Name: Tyler H. Gordon _____

Address: 101 E Kennedy Blvd Ste 2800 _____

            Tampa, FL 33602 _____

ARTICLE VII   INCORPORATOR

The *name and address* of the Incorporator is:

Name: Tyler H. Gordon _____

Address: 101 E Kennedy Blvd Ste 2800 _____

            Tampa, FL 33602 _____

ARTICLE VIII   EFFECTIVE DATE:
Effective date, if other than the date of filing: ___January 1, 2016_____. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

_____   *12-18-2015*
Required Signature/Registered Agent   Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

_____   *12-18-2015*
Required Signature/Incorporator   Date

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