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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : UNISEARCH, INC. Account Number : I20150000103 Phone : (612)219-4300 Fax Number : (651)666-2789

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FLORIDA PROFIT/NON PROFIT CORPORATION CPF Management, Inc.

Certificate of Status	0
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FAX No.

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

ICLE I NAM, name of the corpor ICLE II PRIN	CIPAL OFFICE				
Principal <u>street</u> address 20 W. Beaver Street		!	Mailing address, if different is:		
sonville, FL 3220				· 	
7/CV 10 2//		nore effective man	nagement expe	rtise.	
			·	770 770 170 180	œ.
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ICLE IV SHALL S	RES 1,000 f stock is: AL OFFICERS AND/OR DIRECTORS				
umber of shares o	f stock is: 1900 AL OFFICERS AND/OR DIRECTORS	Name and Title			
umber of shares o	AL OFFICERS AND/OR DIRECTORS le: Director President Secretary & Treasurer				
number of shares of the control of t	f stock is:				
number of shares of the control of t	f stock is:				
Name and Tit Address	f stock is: AL OFFICERS AND/OR DIRECTORS le: Dean M. Atkinson Director, President, Secretary & Treasurer 2020 W. Beaver Street	Address:			
Name and Tit Address	f stock is:	Address:			
Name and Title Name and Title	f stock is:	Address: Name and Title:			
Name and Title Name and Title	f stock is:	Address: Name and Title:			
Name and Title Address	f stock is:	Address: Name and Title: Address:			
Name and Title Address	AL OFFICERS AND/OR DIRECTORS Le: Dean M. Atkinson Director, President, Secretary & Treasurer 2020 W. Beaver Street Jacksonville, FL 32209	Address: Name and Title: Address:			

Name and Title:		Name and Title:	
Address		Address:	
ARTICLE VI	<u>REGISTERED AGENT</u>		
	Florida street address (P.O. Box NOT acce	eptable) of the registered agent is:	
Name:	Dean M. Atkinson		
Address:	2020 W. Beaver Street		
	Jacksonville, PL 32209		
ARTICLE VII	INCORPORATOR	0CT -	i .
The name and a	address of the Incorporator is:	· 2	•
Name:	Dean M. Atkinson	Airi	
Address:	2020 W. Besver Surect		•
	Jacksonville, FL 32209	<u>ਕ</u>	
Effective date, if (If an effective of filing.) Note: If the date	date is listed, the date must be specific an	. (OPTIONAL) nd cannot be more than five days prior or 90 days after the oplicable statutory filing requirements, this date will not be listed as records.	
Having bean parthis certificate, I	med as registered agent to accept service of am familiar with and accept the appointment of Required Signature/Registered Agents of the service of the servi	f process for the above stated corporation at the place designated in ent as registered agent and agree to act in this capacity O-1	
I submit this does document to the	cument and offirm that the facts stated her	rein are true. I om awars that the faiss information submitted in a tree felony as provided for in s.817.155, P.S.	
filler	ired Signature/Incorporator	10-1-19	
· - Requ	uen orkumines incorbotatot	Date	