

LETTER OF TRANSMITTAL

P95 000015544

95 FEB 23 PM 2:46

Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: M. C. Brokers, Inc.
(name of corporation)

100001418541
-02/23/95--01062--011
***122.50 ***122.50

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,



Errol Potter

(individual's name)

M. C. Brokers, Inc.

(name of corporation)

MAILING ADDRESS OF CORPORATION

1606 ROSS Ln.

New Smyrna Bch. Fl. 32168

PHONE

(904) 423-9482

Area Code

Number

Ext.

ARTICLES OF INCORPORATION

of

M. C. Brokers, Inc.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

M. C. Brokers, Inc.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue Five Hundred shares (500) of One Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>M.C. Brokers, Inc.</u>		
ADDRESS	<u>1606 Ross Ln.</u>		
CITY	<u>New Smyrna Bch.</u>	FLORIDA	ZIP <u>32168</u>

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	<u>Errol Potter</u>		
ADDRESS	<u>101 Lincoln Ave.</u>		
CITY	<u>New Smyrna Bch.</u>	FLORIDA	ZIP <u>32169</u>

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have Three (3) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>Errol Potter</u>		
ADDRESS	<u>101 Lincoln Ave.</u>		
CITY	<u>New Smyrna Bch.</u>	STATE <u>Fl.</u>	ZIP <u>32169</u>
NAME	<u>Deborah Klingen</u>		
ADDRESS	<u>101 Lincoln Ave.</u>		
CITY	<u>New Smyrna Bch.</u>	STATE <u>Fl.</u>	ZIP <u>32169</u>
NAME	<u>Steve Ganoe</u>		
ADDRESS	<u>11926 S.W. 13 th Ct.</u>		
CITY	<u>Ft Lauderdale</u>	STATE <u>Fl.</u>	ZIP <u>33325</u>

FILED
CLERK OF STATE
FEB 23 PM 2:46
TALLAHASSEE, FLORIDA

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Errol Potter		
ADDRESS	101 Lincoln Ave.		
CITY	New Smyrna Bch.	STATE	Fl. ZIP 32169
NAME	Deborah Klingen		
ADDRESS	101 Lincoln Ave.		
CITY	New Smyrna Bch.	STATE	Fl. ZIP 32169
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 21 day of FEBRUARY, 19 95.

Deborah Klingen WITNESS (Seal)
Errol Potter WITNESS (Seal)
 _____ (Seal)

STATE OF FLORIDA)
 COUNTY OF VOLUSIA) SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

<u>Errol Potter</u> Signature	<u>FLDA P360-310-47-123-0</u> Form of Identification
<u>Deborah Klingen</u> Signature	<u>FLDL K452-161-59-747-0</u> Form of Identification
_____ Signature	_____ Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that _____ executed these Articles of Incorporation, that I relied upon the form _____ of identification of the above named person _____ as indicated opposite each name, and that an oath (was)(was not) taken.

NOTARY RUBBER STAMP SEAL

ALAIN A. LOYD
 NOTARY PUBLIC, STATE OF FLORIDA
 COMM. EXP. SEPT. 11, 1998
 #CC406116

Witness my hand and official seal in the County and State last aforesaid this 21st day of February, 19 95

Alain A. Loyd
 Notary Signature

ALAIN A. LOYD
 Printed Notary Signature

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

M. C. Brokers, Inc.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 101 Lincoln Ave.
New Smyrna Bch. Fl. 32169

has named Errol Potter
located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.

Errol Potter
(registered agent)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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