

TRANSMITTAL LETTER

P95000032363

Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

SUBJECT: Bob Garvin & Associates, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one [1] copy of the articles of incorporation and a check for \$70.00.

FROM: Robert A. Garvin
Name (printed or typed)

3980 Garvin Lake Drive
Address

Palm Bay, Florida 32909-6103
City, State & Zip

(407) 723-5201
Daytime Telephone Number

ENCLOSURE 14021370
01/21/95 - 01051-000
*****70.00 *****70.00

pk 4/25

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 21 PM 3:08

NOTE: Please provide the original and one [1] copy of the articles.

Articles of Incorporation of

Bob Garvin & Associates, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 21 PM 3:08

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 shall be:

Bob Garvin & Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**3980 Garvin Lake Drive
Palm Bay, Florida 32909-6103**

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

7500 Shares of Common Stock

**ARTICLE IV
INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is:

Robert A. Garvin
3980 Garvin Lake Drive
Palm Bay, Florida 32909-6103

**ARTICLE V
INCORPORATOR**

The name and street address of the Incorporator to these Articles of Incorporation is:

Robert A. Garvin
3980 Garvin Lake Drive
Palm Bay, Florida 32909-6103

Marsha G. Garvin
3980 Garvin Lake Drive
Palm Bay, Florida 32909-6103

The undersigned incorporator has executed these Articles of Incorporation this _____
12th day of April, 1995

Robert A. Garvin

signature

Marsha G. Garvin

signature

signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

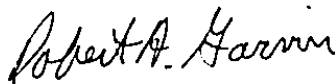
Bob Garvin & Associates, Inc.

1) The name of the corporation is:

Robert A. Garvin
3980 Garvin Lake Drive
Palm Bay, Florida 32909-6103

2) The name and address of the registered agent and office is, (post office box is not acceptable):

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the 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 obligation of my position as registered agent.



(Signature)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 21 PM 3:00