P9500037980 CAPITAL CONNECTION, INC.

RE: __

417 E. Virginia St., Suite 1, Tallahasare, Fl. 32301, (904)2248870 Mailing Address: Post Office Box 10349, Tallahasare, Fl. 32302 TOLL FREE No. 1-800-342-8062 FAX (904) 222-1222

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Pisase remit invoice number with payment TERMS: NET 10 DAYS FROM INVOICE DATE 1 1/2% per month on Past Due Amounts Past 30 Days, 18% per Annum.

THANK YOU from Your Capital Connection

95 HAY 12 PH 2:49

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE | NAME

The name of the corporation shall be:

GEICOHP, INC.

ARTICLE II PRINCIPAL OFFICE

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

8321 MANAUISTA ST.

JACKSONVILLE, FL 32211

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: $\frac{1}{2}$

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JEFFERY M. Scott
2804 Remimton Green Circle
Post office Drawer 12429
Tallahussee fl 32317-2429

ARTICLE V INCORPORATORIS

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

| The undersig | ned incorporator(s) has(have) exec | uted these Articles of incorporation this |
|--------------|------------------------------------|---|
| | day of | , 19 <u><i>95</i></u> . |
| | Signature Signature | |
| | Signature | |
| | Signature | |

Articles of Incorporation Filing Fee - \$35

FILED DIVISION OF CORPORATIONS

CERTIFICATE OF DESIGNATION OF MAY 12 PH 2: 1,9 REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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.

| rionida. |
|---|
| 1. The name of the corporation is: GCICOMP, INC. |
| 2. The name and address of the registered agent and office is: |
| Jeffery M. Scott |
| (Name) |
| 2BOY Reminston Green Circle Suite 4 (P.O. Box not acceptable) |
| (P.O. Box <u>not</u> acceptable) |
| Tallahassee, FL 32717-2427 (City/State/Zip) |
| (City/State/Zip) |
| Having been named as registered agent and to accept service of process for the above stated corporation 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. |
| (Signature) Mry 17, 1995 (Date) |