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

Gentlemen:

Re: PALM HAMMOCK Inc. (name of corporation)

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,

7000001477687 -05/05/95--01111--002 ****122.50 ****122.50

ROBERT C. ALBRITTON, JR.
(individual's name)

PHONE

Number

735-2236

(813)

Area Code

PALM HAMMOCK, INC.

(name of corporation)

Mailing address of corporation

P. O. BOX 679

ZOLFO SPRINGS, FL 33890

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Ext.

Ktk

Seminole Form 215: Trans. Letter (7-90)



May 9, 1995

ROBERT C. ALBRITTON, JR. P.O. BOX 679 ZOLFO SPRINGS, FL 33890

SUBJECT: PALM HAMMOCK, INC. Ref. Number: W95000009784

We have received your document for PALM HAMMOCK, INC. and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6927.

Letter Number: 095A00023193

Kanut Khosla Corporate Specialist

ARTICLES OF INCORPORATION

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	··· · · · · · · · · · · · · · · · · ·	PALM HAMM		· · · · · · · · · · · · · · · · · · ·
The und	lersioned subscriber(s	•	of corporation) poration, natural person(s) compet	tow to contract, hereby form :
corporat	tion under the laws	of the State of Florida.	homeond manner becoming sometime	on to comment necessy recess.
			CORPORATE NAME	1741 SEC 951
The nam	ne of the corporatio		MOCK, INC.	HAY 2
		ARTICLE	II - DURATION	ED AH 9: 3: KY CF STATESSEE, FLORI
This cor	poration shall exist ;	perpetually unless dissolve	ed according to Florida law.	1.514 1.514 1.514
	•	ARTICLE	: III - PURPOSE	32 RIDA
The corp United 5	poration is organized States and the State	for the purpose of engagin of Florida.	ng in any activities or business per	mitted under the laws of the
		ARTICLE IV	- CAPITAL STOCK	
		to issue FIVE HUNDRED		f ONE DOLLAR
Dollar(s)	(\$ ^{1.00}) par value Commo	on Stock, which shall be designat	ted "Common Shares."
	ART	TICLE V - INITIAL REC	GISTERED OFFICE AND AGEI	V7'
The stree			and the name of the Initial Regis	•
		d Highway 64, NE co		
CTTY	ZOLFO SPRINGS		FLORIDA	ZIF 33890
The prine	cipal office, if knowr	n, or the mailing adress o		
NAMB PA	ALM HAMMOCK, INC	7.		
	P. O. BOX 679			
CTTY	ZOLFO SPRINGS		i1.ORIDA	zir 33890
!		ARTICLE VI - INITIA	L BOARD OF DIRECTORS	
This corporate increased addresses	oration shall haveT or diminished from of the initial directo) directors initially. The numberaws, but shall never be less than	er of directors may be either to one (1). The names and
NAME	ROBERT C. ALBR	RITTON, JR.		
ADDRESS			ghway 64, NE corner	
CTIY	ZOLFO SPRINGS,		STATE FL	zir 33890
NAME	SHERRY MCMILLA			
ADDRESS			ighway 64, NE corner	
CITY	ZOLFO SPRINGS,		STATE FL	ZIP 33890
NAME	VICTORIA L. AL			
ADDRESS	P. O. BOX 636		ighway 64. NE corner	
CITY	ZOLFO SPRINGS,		STATE FL	ZIP 33890

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SEMINOLE-MIAMI 012593

FORM 215: ARTICLES OF INCORPORATION, PAGE 1

ARTICLE VII - INCORPORATORS

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

ADDRESS P. O. BOX 679 Highwaya	17 and Highway 64, NE corner	
	STATE FL	ZJP 33890
IAME		
DDRISS		
my	STATE	7,1P
AMB		
DDRESS		
rry	STATE	ZJP
day of <u>M.A.Y</u>	Robert C. all Is n.	(Se
		(Se
	•	(Sc
STATE OF FLORIDA)	
COUNTY OF) SS	
before me, a Notary Public authorized to tappeared:	ake acknowledgments in the State and County s	
Signature	Form of Identifie	cation
Signature Signature	Form of Identific	
Signature Signature snown to me and known to be the person(s) wh	Form of Identific Form of Identific o executed the foregoing Articles of Incorporation,	ation stice who acknowledged before
Signature Signature nown to me and known to be the person(s) wh	Form of Identific Form of Identific o executed the foregoing Articles of Incorporation, les of Incorporation, that I relied upon the form	ation ation who acknowledged before
Signature Signature nown to me and known to be the person(s) where the thick is a second these Artic	Form of Identific Form of Identific o executed the foregoing Articles of Incorporation, les of Incorporation, that I relied upon the form	ation who acknowledged before identification of the above ty and State last aforesaid this

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

PALM HAMMOCK, 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

ZOLFO SPRINGS, HARDEE COUNTY, FLORIDA Highways 17 and Highway 64, NE corner has named ROBERT C. ALBRITTON, JR located at the aforesaid address, as its Registered Agent to accept service of process

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.

within this state.