

# TRANSMITTAL LETTER

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

SUBJECT: Michael C. Erickson, INC
(Proposed corporate name - must include suffix)

600001501506 -05/30/95--01060--017 \*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclo:	sed is an origina	al and one (1) co	py of the articles o	of incorporation	and a check	
	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy  Additional Cop	\$131.25 Filing Fee, Certified Copy & Certificate y Required		
FROM: Michael Ericken  Name (printed or typed)  1700 E 13th St # 8FE						
		Clevela	Address ad , O H y, State & Zip	44 114	6/0	
			689 – 7852. Telephone number	, , , , , , , , , , , , , , , , , , ,	(2	

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

## ARTICLES OF INCORPORATION

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

#### ARTICLE I NAME

The name of the corporation shall be:

Michael C. Erickson, INC.

#### ARTICLE II PRINCIPAL OFFICE

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

3753 High bluff Drive Largo, FL 34640

#### ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Michael Erickson 3753 High bluff Drive Largo, FL 34640

### ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Michael C. Erickson 3753 Highbluff Orive Largo, Fl 34640

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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.

1. The name of the corporation is:	Michael C.	Erickson,	INC

2. The name and address of the registered agent and office is:

Michael Ericksch (NAME)

3753 Highblut Drive

(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Largo, Fl 34640

(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.

Musical Europe 5/1/95 (DATE)