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AMILCO, INC.  
13429 THOMASVILLE CIRCLE  
TAMPA, FLORIDA 33617  
TEL. 988-5202

MAY 16, 1995

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

RE: AMILCO, INC.

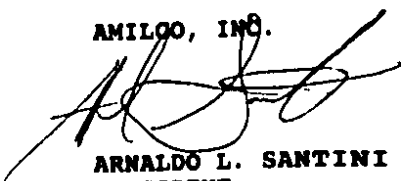
Gentlemen:

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 or the above named corporation.

Very truly yours,

AMILCO, INC.

  
ARNALDO L. SANTINI  
PRESIDENT

000001502030  
-05/31/95--01056--010  
\*\*\*\*122.50 \*\*\*\*122.50

WJW

**ARTICLES OF INCORPORATION**  
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OF

**AMILCO, INC.**

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 shall be:

**AMILCO, INC.**

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**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 corporate is authorized to issue 1,000 shares (common) 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: AMILCO, INC.  
ADDRESS: 13429 THOMASVILLE CIRCLE  
CITY: TAMPA, FLORIDA 33617

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

NAME: ARNALDO L. SANTINI  
ADDRESS: 13429 THOMASVILLE CIRCLE  
CITY: TAMPA, FLORIDA 33617

#### ARTICLE VI INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) 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: ARNALDO L. SANTINI - PRESIDENT  
ADDRESS: 13429 THOMASVILLE CIRCLE  
CITY: TAMPA, FLORIDA 33617

NAME: MILDRED SANTINI - SECRETARY/TREASURE  
ADDRESS: 13429 THOMASVILLE CIRCLE  
CITY: TAMPA, FLORIDA 33617

NAME:  
ADDRESS:  
CITY:

NAME:  
ADDRESS:  
CITY:

NAME:  
ADDRESS:  
CITY:

**ARTICLE VII - INCORPORATORS**

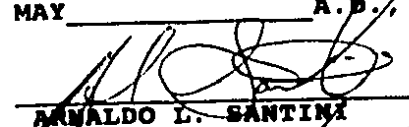
The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME: ARNALDO L. SANTINI  
ADDRESS: 13429 THOMASVILLE CIRCLE  
CITY: TAMPA, FLORIDA 33617

NAME: MILDRED SANTINI  
ADDRESS: 13429 THOMASVILLE CIRCLE  
CITY: TAMPA, FLORIDA 33617

NAME:  
ADDRESS:  
CITY:

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 16TH day of MAY A.D., 1995.

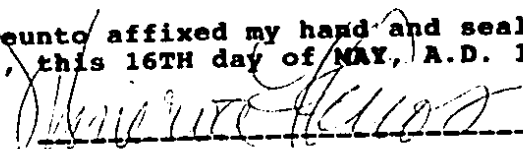
  
ARNALDO L. SANTINI

  
MILDRED SANTINI

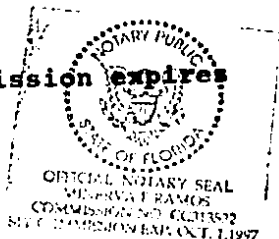
STATE OF FLORIDA )  
COUNTY OF HILLSBOROUGH) SS

Before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared ARNALDO SANTINI AND MILDRED SANTINI known to me and known to be the person(s) who executed the foregoing Articles of Incorporation and who acknowledged before me that THEY executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 16TH day of MAY, A.D. 1995.

  
(Notary Public, State of Florida)

My Commission expires



**CERTIFICATE OF DESIGNATION  
OF REGISTERED AGENT  
CERTIFICATE OF REGISTERED AGENT  
AMILCO, INC.**

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Pursuant to the provisions of sections 48.091 or 617.0501, 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 13429 THOMASVILLE CIRCLE, TAMPA, FLORIDA 33617 has named ARNALDO L SANTINI 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.

  
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(registered agent)

Certificate & Acknowledgement  
Registered Agent