

P95000046540

TRANSMITTAL LETTER

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

RECEIVED 15 10980  
-06/12/95--01048--000  
\*\*\*\*122.50 \*\*\*\*122.50

SUBJECT: MILLMEAD CORPORATION  
(proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and our check  
for \$ 122.50 .

FROM:

LINDA ALDERMAN  
Name (printed or typed)  
4724 NORTH WIND BOULEVARD  
Address  
KISSIMMEE FLORIDA 34746  
City, State, & Zip  
(407) 396-2706  
Telephone Number

6/15/95

(Signature)

Note: Please provide the original and one copy of the Articles.

**ARTICLES OF INCORPORATION**

**OF**

**MILLMEAD CORPORATION**

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 I NAME**

The name of the corporation shall be:

MILLMEAD CORPORATION

**ARTICLE II PRINCIPAL OFFICE**

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

4724 NORTH WIND BOULEVARD  
KISSIMMEE FLORIDA 34746

**ARTICLE III SHARES**

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

100 (ONE HUNDRED)

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

The name and address of the initial registered agent is:

4724 NORTH WIND BOULEVARD  
KISSIMMEE FLORIDA 34746

LINDA ALDERMAN

**ARTICLE V INCORPORATOR(S)**

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

LINDA ALDERMAN  
4724 NORTH WIND BOULEVARD  
KISSIMMEE FLORIDA 34746

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

5TH day of JUNE, 19 95.

  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 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.

1. The name of the corporation is: MILLMEAD CORPORATION

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

LINDA ALDERMAN

(NAME)

4724 NORTH WIND BOULEVARD

(P.O. BOX NOT ACCEPTABLE)

KISSIMMEE FLORIDA 34746

(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 

DATE JUNE 5 1995