P95000049684

# CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
TOLL FREE No. 1-800-342-8062
FAX (904) 222-1222

NAME _____
FIRM _____
ADDRESS _____
_____
_____
PHONE ( ) _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee $ _____ Our $ _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 26 PM 2:06

DB 6/26/95

RE: Elinor P. Smith, P.A.

_____

| | C.C. FEE. | DISBURSED |
|---|---|---|
| ___ Capital Express™ | | |
| ___ Art. of Inc. File | | |
| ___ Corp. Record Search | | |
| ___ Ltd. Partnership File | | |
| ___ Foreign Corp. File | | |
| ___ Cert. Copy(s) | | |
| ___ Photo | | |
| ___ Art. of Amend. File | | |
| ___ Dissolution/Withdrawal | | |
| ___ C U S- | 200001523122 | |
| ___ Fictitious Name File | 06/26/95--01052--004 | |
| | *****70.00 | *****70.00 |
| ___ Name Reservation | | |
| ___ Annual Report/Reinstatement | | |
| ___ Reg. Agent Service | | |
| ___ Document Filing | | |
| ___ Corporate Kit | | |
| ___ Vehicle Search | | |
| ___ Driving Record | | |
| ___ Document Retrieval | | |
| ___ UCC 1 or 3 File | | |
| ___ UCC 11 Search | | |
| ___ UCC 11 Retrieval | | |
| ___ ___ File No.'s, ___ Copies | | |
| ___ Courier Service ___ | | |
| ___ Shipping/Handling | | |
| ___ Phone ( ) | | |
| ___ Top Priority ___ | | |
| ___ Express Mail Prep. ___ | | |
| ___ FAX ( ) pgs. | | |
| SUBTOTALS ___ | | |

| | |
|---|---|
| FEE | $ |
| DISBURSED | $ |
| SURCHARGE | $ |
| TAX on corporate supplies | $ |
| SUBTOTAL | $ |
| PREPAID | $ |
| BALANCE DUE | $ |
| _____ | $ |

| REQUEST | TAKEN | CONFIRMED | APPROVED |
|---|---|---|---|
| DATE | | | |
| TIME | | | CK No. |
| BY | | | |

WALK-IN
Will Pick Up 6:26 12pm

Please 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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 26 PM 2:06

# ARTICLES OF INCORPORATION

# OF

# ELINOR P. SMITH, P.A.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Professional Service Corporation Act, hereby adopts the following Articles of Incorporation.

## ARTICLE I: NAME

The name of the corporation is **ELINOR P. SMITH, P.A.**

## ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 607 S. Westland, #19, Tampa, FL 33606.

## ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of one dollar ($1.00) per share.

## ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Elinor P. Smith, 607 S. Westland, #19, Tampa, FL 33606.

## ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Ta lahassee, FL 32301.

## ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of the member of the initial Board of Directors of the corporation is:

P/S/T Elinor P. Smith
607 S. Westland, #19, Tampa, FL 33606

## ARTICLE VII: PURPOSE

The purpose of the corporation is to practice law.

The undersigned has executed these Articles of Incorporation this 26th day of June, 1995.

Barbara Neeley

Capital Connection, Inc.
Barbara Neeley - President
Incorporator

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DIVISION OF CORPORATIONS

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

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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:

ELINOR P. SMITH, P.A.

2. The name and street address of the registered agent and office is: Elinor P. Smith

607 S. Westland, #19, Tampa, FL 33606

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.