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TRANSMITTAL LETTER

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

SUBJECT: M.C.	McLain Ser	vices Incorp	orated		
(Pr	oposed corporate	namn - must Include su	iffix)		
 Enclosed is an original for ; 	and one (1) co	ppy of the articles o	of incorporation and a	ı check	
\$70.00	[X] \$78.75	\$122.50	0131.25		
Filing Fea	Filing Fee	Filing Foo	Filing Fee,		
	& Certificate	& Certified Copy	Certified Copy & Certificate		
		Additional Cop			
		<u> </u>			
FROM:	Mike Mc	Lain			
	·	(printed or typed)		0,	
	1550 s.	W. 27th Court	,	24 C	
	Address				
	Et. Lau	derdale, FL	33315		
		y, State & Zip			
	Cit	y, State of Lip)	
	(305) 7	65-0584			
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NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 28, 1995

MIKE MCLAIN 1550 S.W. 27TH CT. FT. LAUDERDALE, FL 33315

SUBJECT: MCLAIN SERVICES INCORPORATED

Ref. Number: W95000013188

We have received your document for MCLAIN SERVICES INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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) 487-6931.

Steven Godfrey Corporate Specialist

Letter Number: 395A00031707

ARTICLES OF INCORPORATION

4 1

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-

M. C. McLain Services Incorporated

ARTICLE II PRINCIPAL OFFICE

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

1550 S.W. 27th Court Ft. Lauderdale, FL 33315

ARTICLE III SHARES

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

100

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

Mike McLain 1550 S.W. 27th Court Ft. Lauderdale, FL 33315

INCORPORATOR(S) ARTICLE V

See instructions for officers/directors

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

Mike McLain 1550 S.W. 27th Court Ft. Lauderdale, FL 33315

Susan McLain 1550 S.W. 27th Court Ft. Lauderdale, FL 33315

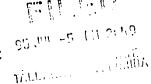
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

22nd day of June Signature Signature

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

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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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: M.C. McLain Services 1 corpor	ated
2. The name and a	address of the registered agent and office is	
	Mike McLain (NAME)	
	1550 S.W. 27th Court (F.O. Box or Mail Drop Box MOT Acceptance)	
	Ft. Lauderdale, FL 33315 (City/Stati/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)