

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

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Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$131.25 \$70.00 \$78.75 \$122.50 Filing Fee, Filling Fee & Certified Copy Filing Fee Filing Fee Cartified Copy & Certificate % Certificate Additional Copy Required FROM: MICHAEL S. MITCHELL Name (printed or typed) 4500 140TH AVE NORTH SWITE Address CLEARWATER, FL 34623 City, State & Zip (813) 523-0818 Daytime Telephone number

SUBJECT: MITCHELL PROJECT MANAGEMENT, INC.

(Proposed corporate name - must include suffix)

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 Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

MITCHELL PROJECT MANAGEMENT, INC.

ARTICLE II PRINCIPAL OFFICE

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

4500 140TH AVE NORTH, SUITE 121 CLEARWATER, FL 34622

ARTICLE III SHARES

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

50,000
FIFTY THOUSAND

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

MICHAEL S. MITCHELL 125 ARBOR DRIVE W. PALM HARBOR, FL 34683

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 S. MITCHELL US ARBOR DRIVE W. FALM HARBOR, FL 34683

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

17 TH day of July , 19 95 .

Signature

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

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:	MITCHELL	PROTECT	MANAGE	MENT.	1NC.
2. The name and address of the registere	ed agent and offic	e is:			
MICHAEL S.	MITCHELL (NAME)				· ·
	Mail Drop Box NO	T acceptable	 		
PALM HARDER,	FL 34673 (CITY/STATE/ZIP))		į II	
Having been named as registered ages corporation at the place designated in th agent and agree to act in this capacity. relating to the proper and complete perfo obligations of my position as registered o	his certificate, I h I further agree to ormance of my di	ereby accept o comply wit	the appointi h the provisi	nent as i ons of a	registered Il statutes
(SIGNATURE)		<u>5</u>	<u>'uly /7, 17</u> Date)	95	