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TRANSMITTAL LETTER

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

U.S. DEPARTMENT OF STATE
OFFICE OF THE SECRETARY
*****20.00 *****20.00

SUBJECT: FAMILY CHILDRENS' BUREAU INC
(proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and our check
for \$ 35.00

FROM:

PAUL V. METCALFE
Name (printed or typed)
P.O. Box 567
Address
ASTATULA, FL 34705
City, State, & Zip
(904) 343-5342
Telephone Number

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

ARTICLES OF INCORPORATION

OF

FAMILY CHILDRENS' BUREAU INC.

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:

FAMILY CHILDRENS' BUREAU INC.

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 567
ASTATULA, FL 34705

ARTICLE III SHARES

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

50,000 AT A PAR VALUE OF = .01 PER SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

PAUL METCALFE MAN'S COVE
FISHER
29115 EICHELBERGER RD LOT 75A
TAVARES FL 32778

ARTICLE V INCORPORATOR(S)

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

PAUL METCALFE
29115 EICHLEBERGER RD. LOT 75A
TAVARES, FL. 32778

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

23rd day of AUGUST, 1995.

Paul M. Metcalfe

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: CHILDRENS' FAMILY ~~TRUST~~ BUREAU INC

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

PAUL METCALFE
(NAME) FISHERMAN'S COVE
29115 EICHELBERGER RD. LOT 15A
(P.O. BOX NOT ACCEPTABLE)
TAVARES FL. 32778
(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

Paul V. Metcalfe

DATE

8/23/95