## P95000073740

#### TRANSMITTAL LETTER

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

7377778 - 1984 - 1985 -09772795 - 1984 - 1987 - +++++78, 78 - +++++78, 75

SUBJECT: Michael Andrew & Associates Inc.
(Proposed corporate name - must include suffix)

Enclo for :	sed is an origina	l and one (1) co	py of the articles of	f incorporation a	and a check		
	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy  Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required			
	FROM: Michael Hivires Fernanders Name (printed or typed)						
	12630 Equestrian Circle Ste. 180						
			OCS FL 3	13907			
		S 2 -	131-CQ4	13	V 1		

NOTE: Please provide the original and one copy of the articles.

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#### ARTICLES OF INCORPORATION

3 (200 m)

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:

Michael Andrew & Associates, Inc

#### ARTICLE II PRINCIPAL OFFICE

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

12630 Equestrian Circle, Ste 1901 F+ Myers, FL 33907

#### ARTICLE III SHARES

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

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

Michael A. Fernandez 12630 Equestrian Circle Ste 1801 Ft. Myers, FL 33907

#### 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 Fernandez - President 12630 Equestrian Circle Ste 1801 F+ Myers, FL 33907

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

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:	Michael Andrew & Associates
	-	Inc
2.	The name and address of the registe	ered agent and office is:
	Michae	1 A Fernandez President
	12(031) (P.O. Box	or Mall Drop Box NOT ACCEPTABLE)
	Ft me	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.

y (h. a., fa-2) (SIGNATURE) 9-15-95 (DATE)

# P95000073740 Division of Corporations

Attn: Amendment Section P.O. Box 6327 Tallahassee, FL 32314

RE: Michael Andrew & Associates, INC. Document NO. P95000073740 Change of Address

New Address: Michael Andrew & Associates, INC 12730 Equestrian Circle # 2808 Ft. Myers, FL 33907

Thank You, Tanya Fernandez

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## P95000073740

MICHAEL ANDREW & ASSOCIATES 12730 Equestrian Circle, Suite 2808 Fort Myers, Florida 33907

OFFICE USE ONLY

-74.

Examiner's Initials

### CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

Trademark

Other

CR2E031(10/92)

1					
(Comp.	ration Name)	(Document #)	(Document #)		
(Согро	ration Name)	(Document #)			
	ration Name)	(Document #)	<del></del>		
	ration Name)	(Document #)	DIVISION DEC		
Walk in Mail out	Pick up time	Certified Copy			
	Will wait Photocopy	Certificate of Status	COSPON		
NEW FILINGS	AMENDMENTS				
Profit	Amendment	<del></del>	<b>- 60</b>		
NonProfit	Resignation of R.A. Offi	Cer/Director			
Limited Liability	Change of Registered Ag		0165654 01093004		
Domestication	Dissolution/Withdrawal	-12/U1/95 *****35.	01093004 00 *****35.		
Other	Merger				
OTHER FILINGS	REGISTRATION/	<del></del>			
Annual Report	QUALIFICATION				
Fictitious Name	Foreign				
Name Reservation	Limited Partnership				
	Reinstatement	TLL DEC 1	1 1995		
		ILL UCU '	1 1773		

Florida Department of State, Sandra B. Mortham, Secretary of State

#### STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1a. The name of the corporation is: Michael Andrew - Associtos The. 1b. The mailing address of the corporation is: 12730 1c. Date of incorporation: Document number: 495 The name and address of the current registered agent and office: Fermy 3. The name and address of the new registered agent and office:(P.O. Box Not Acceptable) Michael Fernandez Equestrian Circle Ste 2808 The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical. Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board. (Signature of an office) chairman or vice chairman of the board) Michael A Fernandez - President (Printed or typed name and title) Having been named as registered agent and to accept service of process for the above stated corporation, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. (Signature of Registered Agent) (Date) If signing on behalf of an entity:

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

FILING FEE: \$35.00

(Typed or Printed Name)

CR2E045(11/94)