P96000006184

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 290000000115755662 -01/03/36--01057--005 +****8.75 *****78.79

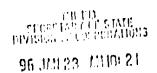
SUBJECT:	Proposed corporate	a name - must include suffix)
e e		
Enclosed is an origina for : \$70.00 Filing Fee	al and one (1) c \$78.75 Filing Fee & Certificate	### \$122.50 ### \$131.25 \$122.50 ### \$131.25 Filing Fee
FROM:	Bernadine	B. Leach / The Philbern Group (printed or typed)
	210 W. Ritt	tenhouse Square, Suite 2302 Address
	215/731-08	ity, State & Zip 888
1		e Telephone number
9.612.509-6	271	
9.612.509-6 196 — 464		

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

i. cr. 1/23/91e



Secretary of State



January 8, 1996

THE PHILBERN GROUP ATTN: BERNADINE B. LEACH 210 WEST RITTENHOUSE SQUARE #2302 PHILADELPHIA, PA 19103

SUBJECT: THE PHIBERN GROUP, INCORPORATED

Ref. Number: W96000000464

We have received your document for THE PHIBERN GROUP, 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 corporate name must be identical throughout the document.

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

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) 487-6973.

Claretha Golden Document Specialist

Letter Number: 096A00000763

ARTICLES OF INCORPORATION

SECRETARY OF STATE DIVISION OF COLPORATIONS

96 JAMES ATTOM 21

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.

ARTICLEI NAME

The name of the corporation shall be:

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PHILTSERN

The chabern Group, 1 orporated

ARTICLE II PRINCIPAL OFFICE

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

5000 San Jose Blvd., Suite 182 Jacksonville, FL 32256

ARTICLE III SHARES

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

One Hundred (100)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Robert L. Jacon's C.P.A. 5000 San Jose., Suite 182 Jacksonville, FL 32256

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):

Bernadine B. Leach, President 2299 South Kirkman Road Suite #333 Orlando, FL 32811

Robert L. Jacobs, Secretary, Tresurer 5000 San Jose Blvd., Suite 182 Jacksonville, FL 32256

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

13 day of <u>Nothernher</u>, 19 <u>95</u>.

Bernalize B Seach

Signature

X Robert L. Jacob

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:	The Philbern Grou		p, Incorporated	
2.	The name and address of the regist	ered agent and office is:			(*1
	Robert L.	Jacobs		95 iii	17.00 17.00
		(NAME)			17 (17) 17 (17) 18 (18) 18 (18)
		se Blvd., Suite or Mail Drop Box NOT Acc			
	Jacksonvi	(CITY/STATE/ZIP)			部。21

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.

X Nobel F. Jacob Mw. 13 1995
(SIGNATURE) (DATE)