

P960000008464

CAPITAL CONNECTION, INC.

412 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

NAME _____
 FIRM _____
 ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Mailor No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

Pmc 1.26.96

RE: Almons Creative
Services, Inc

	C.O. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input type="checkbox"/> Foreign Corp. File		
<input checked="" type="checkbox"/> () Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S-		
<input type="checkbox"/> Fictitious Name File		
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s, Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone ()		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX () pgs.		
SUBTOTALS		

56 JAN 26 PM 2:56
 FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

900001688559
 -01/26/96--01065--014
 ****122.50 ****122.50

96 JAN 26 PM 1:56
 RECEIVED
 DIVISION OF CORPORATION

FEE.....	
DISBURSED.....	
SURCHARGE.....	
TAX on corporate supplies.....	
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

REQUEST _____ TAKEN _____ CONFIRMED _____ APPROVED _____
 DATE 1/26/96 _____
 TIME 1:00 _____ CK No. _____
 BY CD _____

WALK-IN
 Will Pick Up _____

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU
 from
 Your Capital Connection

ARTICLES OF INCORPORATION
OF
CLEMONS CREATIVE SERVICES, INC.

FILED

96 JAN 26 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned Subscriber hereby makes, acknowledges, and files with the Secretary of State of the State of Florida these Articles of Incorporation, for the purpose of forming a corporation for profit, in accordance with Chapter 607, Florida Statutes, the Florida Business Corporation Act.

ARTICLE ONE
NAME OF CORPORATION

The name of this corporation is:

CLEMONS CREATIVE SERVICES, INC.

ARTICLE TWO
PURPOSE

The purposes for which this corporation is organized are as follows: To transact any and all lawful business for which corporations may be incorporated under the Florida Business Corporation Act.

ARTICLE THREE
CAPITAL STOCK

The aggregate number of shares of stock that this corporation is authorized to issue is 7,500 shares, all of which shall be common shares with a par value of \$1.00.

ARTICLE FOUR
CORPORATE EXISTENCE AND DURATION

This corporation shall commence existence on the date of filing of these Articles of Incorporation and shall exist perpetually thereafter unless dissolved according to law.

ARTICLE FIVE
INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of the initial registered office of the corporation in the State of Florida is 5115 N. Branch Avenue, Tampa, FL 33603, and the initial registered agent is Allyn S. Clemons. The Board of Directors may, from time to time, move the location of the registered office to any other address in Florida, and may from time to time, change the registered agent of the corporation.

ARTICLE SIX
PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office and mailing address of the Corporation is 5115 N. Branch Avenue, Tampa, FL 33603.

ARTICLE SEVEN
NUMBER OF DIRECTORS

The number of directors of this corporation shall not be less than one (1). The number of directors may be increased or diminished from time to time in the manner determined by the By-Laws, but shall never be less than one (1).

ARTICLE EIGHT
NAMES AND ADDRESSES OF BOARD OF DIRECTORS

The initial Board of Directors shall consist of two (2) members who shall serve until the first annual meeting, or until their successors have been elected and qualified. The names and addresses of the initial Board of Directors are as follows:


<u>NAME</u>	<u>ADDRESS</u>
Allyn S. Clemons	5115 N. Branch Avenue Tampa, FL 33603
Girard L. Clemons, III	5115 N. Branch Avenue Tampa, FL 33603

ARTICLE NINE
NAME AND ADDRESS OF INCORPORATOR

The name and street address of the incorporator is as follows:

<u>NAME</u>	<u>ADDRESS</u>
Girard L. Clemons, III	5115 N. Branch Avenue Tampa, FL 33603

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this the 23rd day of January, 1996.


Girard L. Clemons, III

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 23rd day of January, 1996 by Girard L. Clemons, III, who is personally known to me or who has produced Florida Drivers License as identification and who did (did not) take an oath.

Patrick B. Emmanuel, Jr.
Patrick B. Emmanuel, Jr.
Printed Name
(SEAL)
Notary Public, State of Florida

My Commission Expires: _____



PATRICK B. EMMANUEL, JR.
MY COMMISSION # CC286298 EXPIRES
February 12, 1997
BONDED THRU TROY FARM INSURANCE, INC.

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT
UPON WHOM PROCESS MAY BE SERVED**

In pursuance of Chapter 48.091, Florida Statutes, the following
is submitted, in compliance with said Act:

Clemons Creative Services, Inc., desiring to organize under the
laws of the State of Florida with its principal place of business in
the City of Tampa, County of Hillsborough, State of Florida has named
Allyn S. Clemons, whose address is 5115 N. Branch Avenue, Tampa,
County of Hillsborough, State of Florida, 33603 as its agent to accept
service of process within this state.

ACKNOWLEDGMENT:

(MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above
stated corporation, at place designated in this certificate, I hereby
certify that I am familiar with and accept to act in this capacity,
and agree to comply with the provision of said Act relative to keeping
open said office.

By:

Allyn S. Clemons
Allyn S. Clemons

DATED:

1/23/96