P9600009405

TRANSMITTAL LETTER

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

SUBJECT: Julio Agostini and Associates, Inc. (proposed corporate name)

Enclosed Is an original and (1) copy of the articles of corporation and our check for: $\frac{78.75}{}$.

500001693195 -01/26/96--01057--012 *****78.75 *****78.75

FROM:

Julio Agostini and Associates, Inc.

Name(printed or type)

10012 N. Dale Mabry llwy Ste 218

Address
Tampa, FL , 33618

City, State, & Zip

813-961-1261

Telephone Number

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

ARTICLES OF INCORPORATION OF

Julio Agostini & Associates, 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:

Julio Agostini and Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

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

10012 North Dale Mabry Suite 218, Tampa, FL 33618

ARTICLE III SHARES

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

1000 Shares Par Value of \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jose 1 Roman 5008 W.Linebaugh Ave Suite 19 Tampa, FL 33624

ARTICLE V INCORPORATOR(S)

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

Julio Agostini - 5202 Dublin Place, Tampa, FL 33624-2057 President - 600 Shares

Arcelia Agostini -5202 Dublin Place, Tampa, FL 33624-2057 Vice-President - 400 Shares

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

29 day of January /1996.

Signature

Signature

Articles of Incorporation Filing Fee - \$35.00

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 7617.0501; 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: Julio Agostini and Associates Inc.

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

<u>Jose I Roman</u>

(NAME)

5008 W. Linebaugh Ave Ste 19
(P.O. BOX NOT ACCEPTABLE)

Tampa, FL 33624
(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. 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

DATE

1/14/46