

CAPITAL CONNECTION, INC.

417 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 _____

Mail No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

REQUEST TAKEN CONFIRMED _____ APPROVED _____
DATE 2/21/96
TIME 4:00 CK (to) _____
BY 21

WALK-IN
Will Pick Up _____

RE: L. DIANNE FILED

96 FEB 21 PM 4:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Capital Express™
✓ Art. of Inc. File _____
Corp. Record Search _____
Ltd. Partnership File _____
Foreign Corp. File _____
() Cert. Copy(s) _____
Art. of Amend. File _____
Dissolution/Withdrawal _____
C U R _____
Fictitious Name File _____
Name Reservation _____
Annual Report/Reinstatement _____
Reg. Agent Service _____
Document Filing _____
Corporate Kit _____
Vehicle Search _____
Driving Record _____
Document Retrieval _____
UCC 1 or 3 File _____
UCC 11 Search _____
UCC 11 Retrieval _____
File No.'s _____ Copies _____
Courier Service _____
Shipping/Handling _____
Phone () _____
Top Priority _____
Express Mail Prep. _____
FAX () _____ pgs. _____

SUBTOTALS _____

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

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

L. DIANNE MASON, P.A.

FILED

96 FEB 21 PM 4:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is **L. DIANNE MASON, P.A.**

The specific nature of business is to practice law.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 100 S.E. SECOND ST., SUITE #2990, MIAMI, FL 33131.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is L. Dianne Mason, 100 S.E. Second St. Suite 2990, Miami, FL 33131.

ARTICLE V: INCORPORATOR

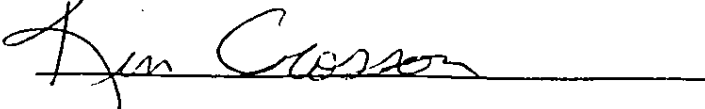
The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of the initial Board of Directors of the corporation is L. Dianne Mason, 100 S.E. Second St., Suite 2990, Miami, FL 33131.

The undersigned has executed these Articles of Incorporation this 16th day of February 1996.

"Capital Connection, Inc. by Kim Crosson, Client Representative"

A handwritten signature in cursive script, appearing to read "Kim Crosson", is written over a horizontal line.

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

FILED
96 FEB 21 PM 4:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Purnuant to the provisions of section 607.0901, Florida Statutes, the mentioned corporation, organised 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: L. DIANNE MASON, P.A.

2. The name and street address of the registered agent and office is: L. DIANNE MASON

100 S.E. Second St. Suite 2990

Miami FL 33131

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.

L. Dianne Mason