

**Steven J. Richey, PA**

ATTORNEYS & COUNSELORS AT LAW  
STEVEN J. RICHEY  
TERRY T. NEAL

February 22, 1996

Corporate Records Bureau  
Division of Corporations  
Department of State  
Post Office Box 6327  
Tallahassee, FL 32301

2000001723812  
-02/26/96--01044--008  
\*\*\*\*122.50 \*\*\*\*122.50

Re: Know Ware, Inc.

Gentlemen:

Enclosed please find an original and a duplicate copy of Articles of Incorporation for Know Ware, Inc. for your consideration and filing if same meets with your approval.

Enclosed is check number 2232 in the amount of \$122.50 made payable to the Secretary of State, representing the filing tax, the resident agent fee and the certified copy of said Articles.

Please furnish me with the certified copy of the Articles of Incorporation. Thank you for your assistance in this matter.

Sincerely,

*Donna D. Richey*  
DONNA D. RICHEY  
Legal Assistant to STEVEN J. RICHEY

dr

Enclosures

*Dmc*  
*2-28-96*

FILED  
96 FEB 26 PM 3:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
**OF**  
**KNOW WARE, INC.**

**FILED**  
96 FEB 26 PM 3:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporators hereby associate themselves together to form a corporation under Chapter 607, Florida Statutes.

**ARTICLE I**

**NAME**

The name of the corporation is KNOW WARE, INC., and its principal place of business is 909 Boylston Street, Leesburg, Florida, with a mailing address of 909 Boylston Street, Leesburg, FL 34748.

**ARTICLE II**

**GENERAL PURPOSE**

The general purpose or purposes for which the corporation is organized is the transaction of any or all lawful business for which corporations may be incorporated under Chapter 607, Florida Statutes.

**ARTICLE III**

**CAPITAL STOCK**

The aggregate number of shares of stock which the corporation shall have the authority to issue is 7,500 shares of common stock having a par value of \$1.00 per share.

#### ARTICLE IV

##### TERM OF EXISTENCE

This corporation shall begin its existence on the day these Articles of Incorporation are filed by the Secretary of State of the State of Florida, and shall exist perpotually.

#### ARTICLE V

##### ADDRESS OF INITIAL REGISTERED OFFICE AND NAME OF INITIAL REGISTERED AGENT

The initial registered office of this corporation and the name of its initial registered agent at such address are:

TIM CONNER  
909 Boylston Street  
Leesburg, FL 34748

#### ARTICLE VI

Pursuant to the provisions of Section 607.0801(3), Florida Statutes, the business of the corporation shall be managed by the Shareholders of the corporation rather than by a Board of Directors.

#### ARTICLE VII

##### OFFICERS

The name and post office address of each of the officers of the corporation are:

PRESIDENT:

SANDRA CONNER  
909 Boylston Street  
Leesburg, FL 34748

SECRETARY/TREASURER:

TIM CONNER  
909 Boylston Street  
Leesburg, FL 34748

**ARTICLE VIII**

**INCORPORATORS**

The name and address of each of the incorporators are:

Name	Address
SANDRA CONNER	909 Boylston Street Leesburg, FL 34748
TIM CONNER	909 Boylston Street Leesburg, FL 34748

**ARTICLE IX**

**AMENDMENT**

The Articles of Incorporation may be amended in the manner provided by law.

**ARTICLE X**

**BYLAWS**

The power to adopt, amend or repeal the Bylaws shall be reserved to the Shareholders of this corporation.

**ARTICLE XI**

**INDEMNIFICATION**

The corporation shall indemnify each officer and director, including former officers and directors, to the full extent permitted by law.

IN WITNESS WHEREOF, we have hereunto set our hands and seals this 22nd day of February, 1996.

Sandra Conner  
SANDRA CONNER

Tim Conner  
TIM CONNER

STATE OF FLORIDA  
COUNTY OF LAKE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared SANDRA CONNER, who executed the foregoing document and who acknowledged before me that she executed the same for the uses and purposes set forth therein, and the said SANDRA CONNER is personally known to me yes (yes/no) or produced \_\_\_\_\_ (type of identification) as Identification.

WITNESS my hand and official seal in the State and County last aforesaid this 22 day of February, 1996.

Donna Dowie Richey  
Signature of Notary



DONNA DOWIE RICHEY  
MY COMMISSION # CC390881 EXPIRES  
September 19, 1998  
BONDED THRU TROY FARM INSURANCE, INC.

Print Name of Notary  
NOTARY PUBLIC STATE OF FLORIDA AT  
LARGE

(Seal)

STATE OF FLORIDA  
COUNTY OF LAKE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared TIM CONNER, who executed the foregoing document, and who acknowledged before me that he executed the same for the uses and purposes set forth therein, and the said TIM CONNER is personally known to me yes (yes/no) or produced \_\_\_\_\_ (type of identification) as Identification.

WITNESS my hand and official seal in the State and County last aforesaid this 22 day of February, 1996.

Donna Dowie Richey  
Signature of Notary



DONNA DOWIE RICHEY  
MY COMMISSION # CC390881 EXPIRES  
September 19, 1998  
BONDED THRU TROY FARM INSURANCE, INC.

Print Name of Notary  
NOTARY PUBLIC STATE OF FLORIDA AT  
LARGE

ACKNOWLEDGMENT:

Having been named to accept service of process for the above corporation at the place designated in these Articles of Incorporation, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Tim Conner  
TIM CONNER

REGISTERED AGENT

FILED  
96 FEB 26 PM 3:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA