

P960000 20479

TRANSMITTAL LETTER

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

SUBJECT: PROTOTYPE MACHINES & MACHINE SERVICES INC.
(Proposed Corporate Name)

700001731627
-03/04/96--01143--001
*****70.00 *****70.00

Enclosed is an original and one (1) copy of the articles of incorporation and our check
for \$ 70.00 .

FROM: Michael Piccolo
Name (Printed or typed)
4250 Dow Rd., Suite 306
Address
Melbourne, FL 32934
City, State, & Zip
(407) 255-2195
Telephone Number

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

FILED
96 MAR -4 PM 12:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/13
3/6/96

ARTICLE V INCORPORATOR(S)

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

1. Michael Piccolo
4250 Dow Rd., Suite 306
Melbourne, FL 32934
2. Bob McFarland
7 Annette Drive
Melbourne, FL 32904

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

27 day of FEBRUARY, 1996

Michael Piccolo (President)
Signature/Title

Bob McFarland Gen. Mgr.
Signature/Title

Articles of Incorporation
Filing Fee - \$35

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: Prototype Machines & Machine Services, Inc.

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

Michael Piccolo

(NAME)

4250 Dow Rd., Suite 306

(P.O. BOX NOT ACCEPTABLE)

Melbourne, Fl 32934

(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. 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.

SIGNATURE

Michael Piccolo

DATE

2/27/96

Registered Agent
Filing Fee - \$35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

96 MAR -4 PM 12:13

FILED