

P96000020932

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

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Mailor No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

CH
3/7/96

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE	3/7		
TIME	10:30		
BY	DD		

RE:

JCT FILED

No. 52504

96 MAR -7 AM 11:51

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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"/> O U S.		
<input type="checkbox"/> Filitious 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

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

THANK YOU
 from

ARTICLES OF INCORPORATION

FILED

ARTICLE I - NAME

96 MAR -7 AM 11:51

The name of this corporation is JCT INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The principal address and the mailing address of the initial registered office of this corporation is 249 ROYAL PALM WAY, SUITE 400, PALM BEACH, FL. 33480.

ARTICLE II - DURATION

This corporation shall have perpetual existence commencing on the date of the filing of these Articles with the Department State.

ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any or all lawful business.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 1000 shares of \$1.00 par value common stock which shall be designated "Common Shares".

ARTICLE V - PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 249 ROYAL PALM WAY, STE 400 PALM BEACH, FL 33480 and the name of the initial registered agent of this corporation is JOHN C. THOMPSON. The registered office of this corporation is the same as the street address.

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have 1 Director(s) constituting the initial Board of Directors. The number of Directors may be either increased or decreased from time to time by the ByLaws. The name(s) and address(es) of the initial Board of Directors of this corporation is (are):

NAME	ADDRESS
JOHN C. THOMPSON	249 ROYAL PALM WAY SUITE 400 PALM BEACH, FL. 33480

ARTICLE VIII - INCORPORATORS

The name(s) and address(es) of each person signing these Articles is(are):

NAME	ADDRESS
JOHN C. THOMPSON	249 ROYAL PALM WAY SUITE 400 PALM BEACH, FL. 33480

ARTICLE IX - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE X - AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the stockholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 6th day of March, 1996

J. L. Johnson
Subscriber

Subscriber

STATE OF FLORIDA

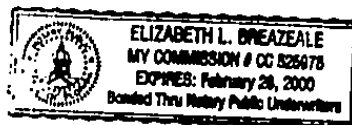
COUNTY OF

Before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared known to be and known by me to be the persons who executed the foregoing Articles of Incorporation, and they acknowledged before me that they executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 6th day of March, 1996.

Elizabeth L. Breazeale
Notary Public, State of Florida at Large

My commission Expires:



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


FILED

96 MAR -7 AM 11:51

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, SECRETARY OF STATE
FOLLOWING IS SUBMITTED: TALLAHASSEE, FLORIDA

JCT INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE
OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE
CITY OF PALM BEACH, STATE OF FLORIDA, HAS NAMED
JOHN C. THOMPSON AT ^{Sub 400} 249 ROYAL PALM WAY, PALM BEACH,
FL. 33480 STATE OF FLORIDA, AS ITS AGENT
TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE: 

(Corporate Officer)

TITLE: PRESIDENT, Director

DATE: 3/5/96

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR
THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN
THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY,
AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL
STATUTES RELATIVE TO THE PROPER PERFORMANCE OF MY DUTIES.

SIGNATURE: 

(Resident Agent)

DATE 3/5/96