NUM Connect: 00:05:8

PHORIVED ISSO NO ROLD

30 YES 12 VI 8: 12

** ENTER 'M' FOR MENU. ** ENTER SELECTION AND (CR): Help F1 Option Menu F2

Marrie Varie

ARTICLES OF INCORPORATION

QZ .

BENO. INC.

FILED
95 IR 16 F. E. 1

0

ARTICLE I. CORPORATE NAME.

The name of this corporation is SEMO, INC.

ARTICLE II. PRINCIPAL OFFICE.

The principal place of business and mailing address of this corporation are 11582 North Williams Street, Dunnellon, Plorida 34431.

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 shares of Common Stock and One Hundred shares of Non-voting Preferred Stock.

ARTICLE IV. INITIAL REGISTERED AGENT AND OFFICE.

The nake and address of the initial registered agent are SHEILA M. BELL, P.O. Box 3476, 11882 North Williams Street, Dunnellon, Florida 34430.

ARTICLE V. INCORPORATORS.

The name and address of the incorporator to these articles of incorporation are SHEILA M. BELL, P.O. Box 3476, 11582 Morth Williams Street, Dunnellon, Florida 33430.

The undersigned has executed these articles of incorporation on April 15 , 1996.

SHELLA M. BELL, Incorporator, President, Secretary-Treasurer

AVONEUE MACKERELL, ESO. 20743 W. PENNSYLVANIA AUE. DUNNEUDN, FL 34430 (352) 489-2264 FBN. 521980

CHRIFICATE OF DESIGNATION RECISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, 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: SEMO, INC.
- 2. The name and address of the registered agent and office is:

SHEILA M. BELL P.O. Box 3476 11582 North Williams Street Dunnellon, Florida 34430

SIGNATURE Shelp M. Bell

TITLE

FRESIDENT. SECRETARY-TREASURER

DATE

april 15, 1996

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 HERRHY 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 DUTLES, AND I AM FAMILTAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

BESTLA M. BELL, GO

as Registered

DATE

april 15, 1996

FILED
96 APR 16 FN 12: 1
SECRETARING STATE