

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 _____

() _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ **Express Mail No.** _____

State Fee \$ _____ Our \$ _____

RE: Backage Storage Inc No: 52504
96 MAY -4 PM 1:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

<input type="checkbox"/> 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)	_____	_____	_____

Art. of Amend. File 7000001811097
Dissolution/Withdrawal -05/07/96--01032--019
C U S- ***122.50 ***122.50
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 () pcs.	_____	_____

SUBTOTALS

FEE	\$	1.00
DISBURSED	\$	2.00
SURCHARGE	\$	1.00
TAX on corporate supplies	\$	15.00
SUBTOTAL	\$	19.00
PREPAID	\$	
BALANCE DUE	\$	
	\$	

REQUEST TAKEN CONFIRMED _____ APPROVED _____
DATE 5/7 _____
TIME 9:30 _____ CK No. _____
BY DP _____

WALK-IN
Will Pick Up _____

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

BUCKEYE STORAGE, INC.

FILED
95 MAY -7 PM 1:40
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 shall be: **BUCKEYE STORAGE, INC.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**3024 Jacaranda
LAKE PLACID, FLORIDA 33852**

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: **100 shares**

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:


**Andrew B. Jackson, Attorney
150 North Commerce
P.O. Box 2025
Sebring, Florida 33871**

ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

**Joanne M. Croniser
3024 Jacaranda
Lake Placid, Florida 33852**

The undersigned has executed these Articles of Incorporation this 6th day of May, 1996.


Print Name: Joanne M. Croniser
Title: President

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

FILED
96 MAY -7 PM 1:40

Pursuant to the provisions of section 607.0501, Florida Statutes, STATE
the undersigned corporation, organized under the laws of the FLORIDA
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:
BUCKEYE STORAGE, INC.
3024 JACARANDA
LAKE PLACID, FLORIDA 33852
2. The name and address of the registered agent and office is:
Andrew B. Jackson
150 North Commerce Avenue
P.O. Box 2025
Sebring, Florida 33871

Signature Joanne M. Croniser
Joanne M. Croniser

Date: May 6th, 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 hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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 Andrew B. Jackson
Andrew B. Jackson
Date: May 6th, 1996