D96000041398 TRANSMITTAL LETTER

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

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				E:CUCUCIO 1 8:1 4:1 500: -US/09/9601014007 ++++78.75 +++++78.75
Enclosed is an origina	l and one (1) co	py of the articles o	of incorporation	and a check
for : \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	filing Fee, Certified Copy & Certificate y Required	
FROM:	JOHN Name	王 ルにV (printed or typed)	AY	_
	1659	SANDCA)S	STLE	RD.
	<u>31-)1/41</u> Cir	23 E L F L F L F	339	57-3638
	94/ - Daytime	472 260 Telephone number	<i>30</i>	

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

The name of the corporation shall be: MCVNY CONSULTANTS INC.

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

1659 SANDENSTLE RD SAMBEL, FLA 33957-3638

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

1000 SHARES.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

EVA LEE MCVAY
1659 SANDCASTLE RD
SHHIBEL, FLA 33457-3638

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

JUMM E MICVAY EVA LEE MICVAY 1659 SHHOCASTLE RD. SAMIBEL, FLN 33957-3638

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

3 PD day of NIAY . 1996.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED 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:	MCVITY CONSU	LTANTS INC
2. The name and address of the regis	stered agent and office is:	
EVF	LEE MCVAY (NAME)	
1659 (P.O. Bo	SAJYD CISTLE OX OF Mail Drop BOX NOT ACCEPTABLE)	- CSD 62
SAH	CITY/STATE/ZIP) 3393	57-3638

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.

Eva Su MeVas 5/3/96
(SIGNATURE) 5/3/96

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314