79600043384 TRANSMITTAL LETTER / 3384

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

550 W 1000 1 612/512/03/5 -05/15/96--01119--017 -4489670,75 - 6564570,75

Enclosed is an original for: \$70.00 Filling Fee	l and one (1) c \$\sum_{\text{P}} \\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	#131.25 Filing Fee, Certified Copy & Certificate	ind a check
FROM:	WALTER A. BAKER Name (printed or typed)			
	5951 ITHACA CIRCLE WEST STORY OF THE STORY O			
		City, State & Zip	33463	PH 5: 1
	(407)	642-8919		TE Tous

(Proposed corporate name - must include suffix)

180 5/W

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

Daytime Telephone number

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.

ARTICLE I NAME

The name of the corporation shall be:

ETLOBAL TECHNICAL SYSTEMS, INC.

ARTICLE II PRINCIPAL OFFICE

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

PRINCIPAL 5951 ITHACA CIRCLE WEST LAKE WORTH, Fl. 33463 MAILING P.O. BOX 7286 LAKE WORTH, Fl. 33466-7286

ARTICLE III SHARES

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

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

WALTER A. BAKER 5951 ITHACA CIRCLE WEST LAKE WORTH, Fl. 33463

ARTICLE V INCORPORATOR(S) See instructions for officers/directors s(cs) of the incorporator(s) to these Articles

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

WALTER A. BAKER 5951 ITANCA CIRCLE WEST LAKE WORTH, Fl. 33463

JUDIE A. BAKER 5951 ITHACA CIRCLE WEST LAKE WORTH, Fl. 33463

The undersigned incorpor	ator(s) has(have) executed these Articles of Incorporation th
day of	, 19
(An additional article mus	t be added if an effective date is requested.)
	Signature
0,	Signature Signature Signature
	Signature

Notarization is not required

Signature

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:	TLUBAL TECHNICAL SYSTEMS, INC		
2. The name and address of the registered age	ent and office is:		
WANTER H	• •		
5751 ITAACA (P.O. Box or Mail)	16 (V)		
LAKE WORTH	7 33463 TY/STATE/ZIP) 3 3463		
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.			
Matthews (SIGNATURE)			