

P96000045919

Mark Chipperfield
930 Britt Court, Suite 124
Altamonto Springs, Florida 32701-2081

FILED

96 MAY 22 PM 1:32

May 15, 1996
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Department of State
Corporate Records/
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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-05/22/96--01124--019
****122.50 ****122.50

RE: INTENTION TO FILE ARTICLES
OF INCORPORATION

Dear Secretary of State:

Enclosed find one original and a copy of the Articles of
Incorporation of ChauField Products, Inc.

Also find enclosed a check made payable to the Secretary of State
in the amount of \$122.50 which is for the statutory filing fee.
Your assistance in establishing the corporation to be known as
ChauField Products, Inc. is greatly appreciated.

Sincerely,

Mark Chipperfield

Mark Chipperfield
AUTHORIZATION BY PHONE TO
CORRECT BA address on
notice of RA.
DATE
BY

11397
PH 5/18/96
twto

ARTICLES OF INCORPORATION
OF

Chaufield Products, Inc.

RECORDED
26 MAY 22 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Incorporation of the undersigned, all of whom are citizens of the United States, desiring to form a profitable corporation under the Florida Corporation Act do hereby certify:

ARTICLE ONE

The name of the Corporation shall be Chaufield Products, Inc.

ARTICLE TWO

The period of its duration is perpetual.

ARTICLE THREE

The purpose said corporation is organized is the transaction of any or all lawful business for which corporations may be incorporated under the Florida Corporation Act.

ARTICLE FOUR

The aggregate number of shares which the corporation shall have authority to issue is one thousand (1,000), all of which shall be common shares having no par value.

ARTICLE FIVE

Each shareholder of any class of stock of this corporation shall be entitled to full preemptive rights to purchase any unissued stock or treasury shares of the corporation and any securities of the corporation convertible into or carrying the right to subscribe to or acquire shares of any such unissued stock or treasury shares.

ARTICLE SIX

The names and addresses of the persons who are to serve as directors until the first annual meeting of the shareholder(s) or until their successors are elected and qualified are:

Mark Chipperfield

(Name)

920 Britt Court, Suite 132
Altamonte Springs, Florida 32701
(Mailing Address)

ARTICLE SEVEN

The street address of its initial registered office is 920 Britt Ct., Suite 132, Altamonte Springs, Florida 32701, and the name of its initial registered agent at such address is Mark Chipperfield.

ARTICLE EIGHT

The Board of Director(s) is empowered to make, alter or repeal the Bylaws of the Corporation without restriction of their powers conferred by statute.

ARTICLE TEN

The name and address of each incorporator is:

Name

Mailing address

Mark A. Chipperfield

1921 Shadyhill Terrace

Winter Park, Florida 32793

ARTICLE ELEVEN

The powers of the incorporator(s) cease upon filing of the Articles of Incorporation.

Notarized:

Sworn to and subscribed before me this day 17th of MAY, 1996.

Susan S. Franklin



SUSAN S. FRANKLIN
My Commission CC480756
Expires May. 08, 1999
Bonded by HAI
800-422-1888

NO. 1 OF REGISTERED AGENT

TO: STATE OF FLORIDA
DEPARTMENT OF STATE

MAY 22 PM 1:32
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

The following is submitted in compliance with Chapter 48.091,
Florida Statutes.

ChauField Products, Inc., a corporation organizing under the laws
of the State of Florida, with its principal office at 930 Britt
Court, Suite 124, Altamonte Springs, Florida 32701 has named Mark
Chipperfield, who is located at 920 Britt Court, Suite 132,
Altamonte Springs, Florida 32701, as its registered agent to accept
service of process within the state.

Signature: _____

Title: _____

Date: _____

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.

Signature: _____

Date: _____