P96000048692

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

Enclosed is an origina	I and one (1) co	py of the articles o	Ωβ _. / ₩₩₩		958 -013 131,25
for : \$70.00 Filing Fee	\$78.75 Filling Fee & Certificate	#122.50 Filling Fee & Cerdfied Copy Additional Cop	\$131.25 Filing Fee, Certified Copy & Certificate y Required		
FROM:	C. Taf	L Park (printed or typed)		ı	
	9048	Address Ma Cuty Ty, State & Zip 12 9595 Telephone number	n Ave F1 3240		र-ख ५ है १८ -
	Jayume	Talaphona numbar		5 1111b 28	· ·

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

GB 6/7/96

ARTICLES OF INCORPORATION

94 JUN 43 JULY 23

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:

T.P.S. Inc. Of North Florida

ARTICLE II PRINCIPAL OFFICE

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

1740 Einerman Ave. Panama City, FI 32405

ARTICLE III SHARES

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

1000 no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

O, Taft Park

1740 Sherman Ave.

Panama Cety, F1 32405

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):

C Tast Park 3379 Cryslal Lake Dr. Chypley if 1 32428

Donna Barfield Rt. 1 Box 450 Wluahitchka, Fl 32465

Sherry A. Park 3379 Crystal Lake Dr. Chipley, F1 32428

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

312 day of May , 1996

Signature
Signature
Signature

Dona Brefuld
/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: T.P.S. Inc. of North	17	Flo	rida
2. The name and address of the registered agent and office is:		55 de la constant de	, F
(NAME) 1740 Shirman Ave (P.O. Box of Mail Drop Box NOT ACCEPTABLE) Parama City F1 32405 (CITY/STATE/ZIP)		11 12 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	

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.

Company Sypt 3 1996 (DATE)