P96000049896

June 07, 1996

Department of State, Division of Corporations Post Office Box 6327

Tallahassee, FL 32314

400001555574 -05/1736-01175-017 *****70.00 *****70.00

Re: HAMMACK CONSTRUCTION COMPANY

Ladies and Gentlemen:

Please find enclosed for filing one original and one copy of the Articles of Incorporation of Hammack Construction Company. Also enclosed is a check in the amount of \$70.00 as the appropriate filing fee.

Please return the copy, stamped to show the date of filing, to the undersigned.

Sincerely,

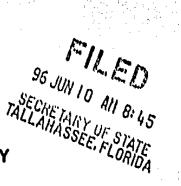
James L. Womack

345 West Madison St., Starke, FL 32091

96 JUN 10 AM 8: 45
SECRETARY OF STATE
SECRETARY OF STATE

ARTICLES OF INCORPORATION

OF



HAMMACK CONSTRUCTION COMPANY

ARTICLE I

The name of the Corporation is Hammack Construction Company.

ARTICLE II

The principal place of business and mailing address of this corporation shall be 345 West Madison St., Starke, FL 32091.

ARTICLE III

The aggregate number of shares which the Corporation has authority to issue is 1,000 shares of common stock with no par value.

ARTICLE IV

The address of the initial registered office of the Corporation is 345 West Madison St., Starke, Florida 32091, and the name of the Corporation's initial registered agent for service of process at such address is James L. Womack.

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: Hammack Construction Company.
- 2. The name of the registered agent and office is:

James L. Womack 345 West Madison St., Starke, Florida 32091

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

96 JUN 10 AH 8: 46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA