

**P96000056841**

**CAPITAL CONNECTION, INC.**

17 B, Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870  
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No.: \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE	7/5/96		
TIME	11:30		
BY	CD		

WALK-IN  
 WILL PICK UP \_\_\_\_\_

of \_\_\_\_\_ NO 52602  
 RE: M T S T Corporation

Service	Fee	Amount
Capital Express™	0.00	
Art. of Ind. File	0.00	
Corp. Record Search	0.00	
Ltd, Partnership File	0.00	
Foreign Corp. File	0.00	
Photo	0.00	
Art. of Amend. File	0.00	
Dissolution/Withdrawal	0.00	
C U S.	0.00	
Fictitious Name File	0.00	
Name Reservation	0.00	
Annual Report/Reinstatement	0.00	
Reg. Agent Service	0.00	
Document Filing	0.00	
Corporate Kit	0.00	
Vehicle Search	0.00	
Driving Record	0.00	
Document Retrieval	0.00	
UCC 1 or 3 File	0.00	
UCC 11 Search	0.00	
UCC 11 Retrieval	0.00	
File No.'s. _____ Copies	0.00	
Courier Service	0.00	
Shipping/Handling	0.00	
Phone ( ) _____	0.00	
Top Priority _____	0.00	
Express Mail Prep. _____	0.00	
FAX ( ) _____ pgs.	0.00	
<b>SUBTOTALS</b>		
<b>FEES</b>	0.00	
<b>DISBURSED</b>	0.00	
<b>SURCHARGE</b>	0.00	
<b>TAX on corporate supplies</b>	0.00	
<b>SUBTOTAL</b>	0.00	
<b>PREPAID</b>	0.00	
<b>BALANCE DUE</b>	0.00	

Please remit invoice number with payment  
 TERMS: NET 10 DAYS FROM INVOICE DATE  
 1 1/2% per month on Past Due Amounts  
 Past 30 Days, 18% per Annum.

**BROWN JUL - 5 1996**

**THANK YOU**  
 from  
 Your Capital Connection

**ARTICLES OF INCORPORATION**  
**OF**  
**M T S T CORPORATION**

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
S-344-5 PH 232

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

**ARTICLE I: NAME**

The name of the corporation is **M T S T CORPORATION**

**ARTICLE II: PRINCIPAL OFFICE**

The principal place of business and mailing address of the corporation is 830 Eaton St., Key West, FL 33040.

**ARTICLE III: CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) class A voting shares and one thousand (1,000) class B non voting-preferred shares having a no par value.

## **ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is Frederick Skomp, 830 Eaton Street, Key West, FL 33040.

## **ARTICLE V: INCORPORATOR**

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

## **ARTICLE VI: INITIAL BOARD OF DIRECTORS**

The name and address of the initial Board of Directors of the corporation is Kim M. Sook, 830 Eaton St., Key West, FL 33040.

The undersigned has executed these Articles of Incorporation this 5th day of July 1996.

"Capital Connection, Inc. by Crystal Dugger, Assistant Office Manager"

Crystal Dugger

07/01/1996 09:34 9042221222

CAPITAL CONNECTION

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SECRETARY OF STATE  
FILED  
DIVISION OF CORPORATIONS  
S.S.L-S PH 2-32

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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: M T S T CORPORATION

2. The name and street address of the registered agent and office is: Frederick Stump

230 Eaton Street

Key West, FL 33040

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.

