

P96000059350

Attorneys and Counselors at Law
Post Office Drawer 950
Apopka, Florida 32704-0950

John A. McLeod
Raymond A. McLeod
William J. McLeod

July 11, 1996

48 East Main Street
Tallahassee, Florida 32301
Telephone: (907) 886-3300
Facsimile: (907) 886-0087

Secretary of State
Corporate Division
PO Box 6327
Tallahassee, FL 32314

RE: RME Services, Inc.

Gentlemen:

FILED
96 JUL 15 11:42
TALLAHASSEE, FLORIDA

I am enclosing herewith an original and a copy of Articles of Incorporation for the above-named corporation. In addition, a check in the amount of \$122.50 is enclosed which represents the following fees:

Filing Fee	\$35.00
Certified Copy	52.50
Registered Agent Fee	35.00
Total	\$122.50

800001898938
-07/16/96--01020--014
***122.50 ***122.50

Please file the original of the enclosed Articles of Incorporation and return a certified copy to the undersigned.

Thank you.

Sincerely yours,

Raymond A. McLeod/jlk
Raymond A. McLeod

RAM/jlk

Enclosures

7-16-96

**ARTICLES OF INCORPORATION
OF
RME SERVICES, INC.**

THE UNDERSIGNED, acting as the incorporator of a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation for such corporation:

FILED
95 JUN 15 1995
CLERK OF THE CIRCUIT COURT
IN AND FOR THE COUNTY OF
DUVAL, FLORIDA

ARTICLE I

The name of this corporation is **RME SERVICES, INC.**

ARTICLE II

The period of its duration is perpetual.

ARTICLE III

The purpose is to engage in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV

The corporation is authorized to issue 1,500 shares, all of one class, at \$1.00 par value.

ARTICLE V

The name of the Initial Registered Agent is **RAYMOND A. McLEOD** whose mailing address is 48 East Main Street, Apopka, Florida 32703 and the principal office of this corporation is located at 48 East Main Street, Apopka, Florida 32703.

ARTICLE VI

This corporation shall have one (1) Director initially, and the number of Directors may be either increased or decreased from time to time by an amendment of the By-Laws of the corporation in the manner provided by law, but shall never be less than one (1).

The name and address of the initial Director of this corporation is:

RAYMOND A. McLEOD
48 East Main Street
Apopka, Florida 32703

ARTICLE VII

The name and address of the person signing these Articles of Incorporation as the Incorporator is RAYMOND A. McLEOD whose address is 48 East Main Street, Apopka, Florida 32703.

ARTICLE VIII

The power to adopt, alter, amend or repeal By-Laws shall be vested in the Board of Directors.

ARTICLE IX

Directors need not be residents of this state or shareholders unless Articles of Incorporation or By-Laws so require.

ARTICLE X

The shareholders shall have the power to adopt, amend, alter, change or repeal the Articles of Incorporation when proposed and approved at a stockholders meeting, with no less than a majority vote of the common stock issued and outstanding.

ARTICLE XI

If all Directors severally or collectively consent in writing to any action taken or to be taken by the corporation, and the writings evidencing their consent are filed with the Secretary of the corporation, the action shall be as valid as though it had been authorized at a meeting of the Board of Directors.


IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation this 10th day of July, 1996.


RAYMOND A. McLEOD
Incorporator

**STATE OF FLORIDA
COUNTY OF ORANGE**

BEFORE ME, the undersigned authority, personally appeared **RAYMOND A. McLEOD** who is personally known by me to be the person who executed the foregoing Articles of Incorporation of **RME SERVICES, INC.** as the Incorporator, and he acknowledged to and before me that he executed such instrument.

IN WITNESS WHEREOF, I have hereunto placed my hand and seal this 10th day of July, 1996.



Notary Public

Printed Name of Notary
My commission expires:

(SEAL)



CORA JEAN KING
MY COMMISSION # CC327686 EXPIRES
December 14, 1997
BONDED THROUGH TROY FARM INSURANCE, INC

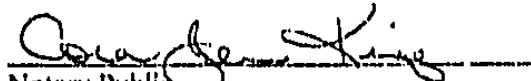
ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

STATE OF FLORIDA
COUNTY OF ORANGE

BEFORE ME, the undersigned authority, personally appeared **RAYMOND A. McLEOD**, known to me to be the person who accepted designation as Registered Agent on behalf of RME SERVICES, INC., and he acknowledged before me that he executed this Acceptance of Designation as Registered Agent freely and voluntarily.


RAYMOND A. McLEOD

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid this 10th day of July, 1996.


Notary Public

Printed name of Notary
My Commission Expires:

(SEAL)



CORA JEAN KING
MY COMMISSION # CC327694 EXPIRES
December 14, 1997
BONDED THRU TRU FAN INSURANCE, INC.

FILED
96 JUL 15 AM 11:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[RME.ART/07-10-96/RAM]

P96000059350

Richard Krampse
 Requirer's Name

1452-D State Rd. 436
 Address

Casselberry, FL 32707
 City/State/Zip / Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

- Walk in
 Pick up time _____
 Certified Copy
 Mail out
 Will wait
 Photocopy
 Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
 97 SEP -9 PM 1:11
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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RA Change

Examiner's Initials 9/16/97

DL

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: **RME SERVICES, INC.**
2. The mailing address of the corporation is: 1452-D State Road 436
Casselberry, FL 32707
3. Date of incorporation/qualification: 7/15/96 Document number: P96-000059350
4. The name and address of the current registered agent and office:
Raymond A. McLeod
48 East Main Street
Apopka, FL 32703
5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)
Richard Krampe
1452-D State Road 436
Casselberry, FL 32707

FILED
97 SEP -9 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.



RICHARD KRAMPE, President
(Signature of an officer, chairman or vice chairman of the board)

7-8-97

(Date)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.



RICHARD KRAMPE
(Signature of Registered Agent)

7-8-97

(Date)

If signing on behalf of an entity:

TYPED NAME AND CAPACITY

P96000059350

Requestor's Name

Address

1452D Somoran Blvd.
Cannalberry, FL 32707

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)

2. _____ (Corporation Name) _____ (Document #)

3. _____ (Corporation Name) _____ (Document #)

4. _____ (Corporation Name) _____ (Document #)

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-09/19/97--01026--009
*****35.00 *****35.00

- Walk in
- Mail out
- Pick up time _____
- Will wait
- Certified Copy
- Photocopy
- Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
97 SEP 19 PM 4: 22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ALL SEP 23 1997

Examiner's Initials

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

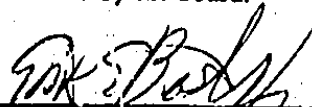
Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: **RME SERVICES, INC.**
2. The mailing address of the corporation is: 1452D Semoran Blvd.
Casselberry, FL 32707
3. Date of incorporation/qualification: 7/15/96 Document number: P96-000059350
4. The name and address of the current registered agent and office:
Richard Krampe
1452D Semoran Blvd.
Casselberry, FL 32707
5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)
Erik Bertling
1452D Semoran Blvd.
Casselberry, FL 32707

FILED
97 SEP 19 PM 4:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

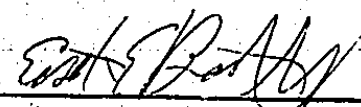


Erik Bertling, Vice President
(Signature of an officer, chairman or vice chairman of the board)

9/16/97

(Date)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.



Erik Bertling
(Signature of Registered Agent)

9/16/97

(Date)

If signing on behalf of an entity:

TYPED NAME AND CAPACITY

CR2E04(1/95)

FILING FEE: \$35.00