

99600006/2/2
THOMAS
TAX ACCOUNTING, INC.

June 6, 1996

Corporate Records Bureau
Division of Corporations
Department of State
409 E. Gaines Street
Tallahassee, FL 32399

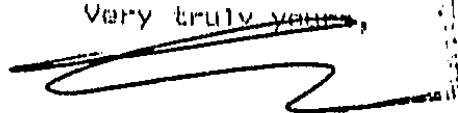
600001857936
-06/11/96--01090--004
****122.50 ****122.50

Gentleman:

Enclosed please find the Articles of Incorporation for
Huffman's Company, Inc.
along with a check in the amount of \$122.50 to cover the
various fees and taxes.

Please return any pertinent information to this office.

Very truly yours,



THOMAS WANDERON

TW/v
Encl.

FILED
95 JUL 23 AM 8:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WPB-DC/76

6/2/96
TB

302



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 12, 1996

THOMAS WANDERON
9915 TAMiami TRAIL NO STE 2
NAPLES, FL 33963

SUBJECT: HUFFMAN'S COMPANY, INC.
Ref. Number: W96000012476

We have received your document for HUFFMAN'S COMPANY, INC. and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6878.

Terri Buckley
Corporate Specialist

Letter Number: 296A00029233

ARTICLES OF INCORPORATION
OF

BUDDY HUFFMAN, INC.

The undersigned subscribers to these Articles of Incorporation, each a natural person competent to contract, hereby associate themselves together to form a corporation, under the laws of the State of Florida.

ARTICLE I - NAME

The name of this corporation is: BUDDY HUFFMAN, INC. and its principal office and mailing address is: 4939 EAST RIVERSIDE DRIVE, FT. MYERS, FLORIDA 33905.

ARTICLE II - NATURE

The nature of the business to be transacted by this corporation is: TOWING, TRUCKING AND HAULING,

To erect dwellings, apartment houses and other buildings, private or public, of all kinds, and to sell or rent the same. To lay out, grade, pave and dedicate roads, streets, avenues, highways, alleys, courts, paths, walks, parks, cemeteries and playgrounds. To buy, sell, mortgage, exchange, lease, let, hold for investment or otherwise, use and operate real estate of all kinds, improved or unimproved; and any right or interest therein.

To manufacture, purchase, or otherwise acquire and to own, mortgage, pledge, sell, assign, transfer, or otherwise dispose of, and to invest in, trade in, deal in and with, goods, wares, merchandise, real and personal property, and services of every class, kind and description; except that it is not to conduct a banking business, safe deposit trust, insurance, surety, express, railroad, canals, telegraph or telephone or cemetery company, a building and loan association, fraternal benefit society, state fair or exposition.

To contract debts and borrow money, issue and sell or pledge bonds, debentures, notes and other evidences of indebtedness, execute mortgages, and transfers of corporate property, or other instruments to secure the payment of corporate indebtedness as required.

To purchase the corporate assets of any other corporation and engage in the same or other character of business.

To guarantee, endorse, purchase, hold, sell, transfer, mortgage, pledge or otherwise acquire or dispose of the shares of the capital stock of, or any bonds, securities or other evidences of indebtedness created by any other corporation, and while owner of such stock, to exercise all the rights, powers and privileges of ownership, including the right to vote such stock. To purchase its own capital stock from earned surplus.

To engage and deal with the directors of this corporation or its officers in contracts or otherwise, and in the absence of fraud, no director or officer of this corporation shall be disqualified from an arms length transaction with this corporation.

ARTICLE III = CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is : FIVE HUNDRED (-500-) having a \$1.00 Par value. The consideration to be paid for each share shall be in money, property or services as determined by the Board of Directors.

ARTICLE IV = INITIAL CAPITAL

The amount of capital with which this corporation shall begin business is not less than Five Hundred Dollars (\$500.)

ARTICLE V = TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. - ADDRESS

The street address of the initial registered office of this corporation shall be: 4939 EAST RIVERSIDE DRIVE, FT. MYERS, FLORIDA 33905 and the name of its initial registered agent at such address is: EVELYN BERMUDEZ. The Board of Directors may from time to time move the registered office to any other address in Florida.

ARTICLE VII. - DIRECTORS

This corporation shall have ONE director initially. The number of directors may be increased or diminished from time to time by the By-Laws adopted by its stockholders, but shall never be less than one.

ARTICLE VIII. - INITIAL DIRECTORS

<u>NAME</u>	<u>ADDRESS</u>
BUDDY HUFFMAN JR.	4939 EAST RIVERSIDE DRIVE FT. MYERS, FLORIDA 33905

ARTICLE IX. - SUBSCRIBERS

<u>NAME AND ADDRESS</u>	<u>CONSIDERATION</u>	<u>NO. OF SHARES</u>
BUDDY HUFFMAN JR. 4939 EAST RIVERSIDE DRIVE FT. MYERS, FLORIDA 33905	\$500.00	500

ARTICLE X :: AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders, and approved at a stockholder's meeting by a majority of the stock entitled to vote thereon unless all the directors and all the stockholders sign a written statement manifesting their intention that a certain amendment of the Articles of Incorporation be made.

Eugene Berenson
Buddy Huffman SEAL
SEAL

State of Florida

County of Lee

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared EVELYN BERMUDEZ, POWER OF ATTORNEY FOR BUDDY HUFMAN JR., to me known to be the person described as subscriber in and who executed the foregoing Articles of Incorporation and acknowledged before me that he subscribed to those Articles of Incorporation.

WITNESS MY hand and seal this 16TH day of
JULY, 1996.

My commission expires:



THOMAS WANDERON
MY COMMISSION # CC392405 EXPIRES
July 26, 1998
BONDED THROUGH TROY FARM INSURANCE, INC.

[Signature]
Notary Public - State of Florida
at Large

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR
THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON
WHOM PROCESS MAY BE SERVED:

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES,
THE FOLLOWING IS SUBMITTED:

FIRST THAT BUDDY HUFFMAN, INC _____
DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE
OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF
FT. MYERS _____, STATE OF FLORIDA, HAS NAMED
EVELYN BERMUDEZ _____, LOCATED AT
4939 EAST RIVERSIDE DRIVE _____, CITY OF FT. MYERS _____,
STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS
WITHIN FLORIDA.

SIGNED: _____

TITLE: PRESIDENT/POWER OF ATTORNEY_

DATE: JULY 16, 1996__

Having been named to accept service of process for the
above stated corporation, at the place designated in this
certificate, I hereby agree to act in this capacity, and I
further agree to comply with the provisions of all statutes
relative to the proper and complete performance of my duties.

SIGNED: _____

DATED: JULY 16, 1996__

GENERAL DURABLE POWER OF ATTORNEY

I, Buddy Hoffman, of Lee County, State of Florida, being at least 18 years of age and mentally competent, do hereby designate Barbara Brown, of Lee County, State of Florida, as my true and lawful attorney-in-fact.

I. Powers:

The above named attorney-in-fact shall have the following powers:

To make, draw and endorse promissory notes, checks or bills of exchange and to waive demand, presentment, protest, notice of protest, and notice of non payment on all such instruments;

To make and execute any and all contracts;

To purchase, sell, dispose of, assign and pledge notes, stocks, bonds and securities, and to exercise such voting rights as my ownership of any notes, stocks, bonds and securities may entitle me, either in person or by proxy;

To sell, purchase, dispose of, assign and pledge any U.S. Savings Bonds and U.S. Treasury Securities in which I may have interest;

To receive and to demand all sums of money, debts, dues, accounts, bequests, interest, dividends and demands whatsoever which are now or shall hereafter become due or payable to me and to compromise, settle or discharge the same;

To have access to any and all safe deposit boxes in my name and to open, inspect, inventory, place items in or remove from, and close said safe deposit boxes;

To bargain for, contract concerning, buy, sell, encumber and in any way and manner, deal with personal property of any kind or nature and to apply or make use of my property for my support and the support of those persons to whom I owe an obligation of support;

To execute instruments to effect the transfer of title to any motor vehicle owned by me;

To maintain, purchase, surrender, acquire, assign, pledge, make claims under, borrow against, pay premiums, fully liquidate, change beneficiaries, designate insureds, and generally deal in all forms of insurance and matters thereon;

To purchase, sell, mortgage, convey and lease any interest in real estate, wherever located, of which I may be owner now or hereafter (if this provision is applicable, this instrument must be recorded);

To represent me in all matters relating to taxation, whether by the Federal government, the government of any State or any local government unit and to prepare, sign and file any documents or forms that may be required in these matters;

and I hereby ratify and confirm all that my attorney-in-fact shall do by virtue hereof.

II. Effective date: (delete inapplicable provision)

(A) This Power of Attorney shall become effective on the 15 day of February, 1985, and shall not be affected by my subsequent disability or incompetence;

(OR)

(B) ~~In the event the above instrument is not duly recorded, this Power of Attorney shall become effective upon my disability or incompetence.~~

III. Termination: (delete inapplicable provisions)

I hereby reserve the right of revocation, however, this Power of Attorney shall continue in full force and effect until:

(A) I have executed a written instrument or an affidavit ~~stating my intention to revoke this Power of Attorney~~ or a written revocation hereof.

(B) ~~the day of my death.~~

(C) _____

Further, I agree to indemnify and hold harmless any person who, in good faith, acts under this Power of Attorney or transacts business with my attorney-in-fact in reliance upon this Power, without actual knowledge of its revocation.

IV. Guardianship (optional)

In the event a judicial proceeding is brought to establish a guardianship over my person or property, I hereby appoint _____ to serve as guardian.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 15 day of February,
1925.

Buddy Hoffmann JR
Buddy Hoffmann

STATE OF INDIANA

COUNTY OF Marshall

Before me, a Notary Public in and for said County and State, personally appeared Buddy Hoffmann JR, who acknowledged the execution of the foregoing General Power of Attorney.

WITNESS my hand and Notarial seal, this 15 day of February, 1925.

Commission Expires:
2-5-29

James P. Hayes
Residing in Marshall, County,
Indiana.

This instrument prepared by: James P. Hayes, Attorney at Law.

PHYSICIAN'S CERTIFICATE (optional)

Based on examination or previous relationship, I hereby certify that I saw _____, on _____, and that in my opinion the said was, at the time of sound mind and capable of understanding and handling (his/her) business affairs.

Date: _____

