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JOHNSON & MOUNT
ATTORNEYS-AT-LAW

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HENRY PAUL JOHNSON P.A. DICK W. MOUNT, JR., P.A.* IRACEY A. WRIGHT 'Aud numered in Onlo TATE TATE TO STATE TATE TATE TO STATE T

July 18, 1996

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 800001901058 -07/23/96--01015--012 ****122.50 ****122.50

Re: Incorporation of Wealth Retirement Asset Protection, Inc.

Dear Sir/Madam:

Enclosed please find the original Articles of Incorporation of Wealth Retirement Asset Protection, Inc., original Certificate Designating Place Of Business Or Domicile For The Service Of Process Within This State, Naming Agent Upon Whom Process May Be Served and our Firm trust account check in the amount of \$122.50.

Please form this corporation and send us a certificate stating same.

Please feel free to contact me if you have any questions.

Very truly yours,
HIMY. WHISOM/672

Henry Paul Johnson

Signed in Mr. Johnson's absence to expedite service

HPJ/tnn Enclosures

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04/23/96

ARTICLES OF INCORPORATION

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OF

WEALTH RETIREMENT ASSET PROTECTION, INCLUDING THE PROTECTION OF TH

KNOW ALL MEN BY THESE PRESENTS:

That I, CHARLES J. CONRICK IV, the undersigned, has this day voluntarily associated myself for the purpose of forming a corporation under the laws of the State of Florida, and to that end does hereby adopt Articles of Incorporation as follows:

ARTICLE 1

The name of the proposed corporation is WEALTH RETIREMENT ASSET PROTECTION, INC.

ARTICLE II

The corporation may engage in any activity or business permitted under the laws of the United States and under the laws of the State of Florida.

ARTICLE III

The type, amount and value of the capital stock of this corporation is 1,000 shares at a par value of \$1.00.

ARTICLE IV

The corporation shall have perpetual existence.

ARTICLE V

The post office address of the temporary principal office of the corporation is: 631 Lambton Lane, Naples, Florida 34104.

ARTICLE VI

The number of directors of the corporation shall not be less than one (1).

ARTICLE VII

The named of the first officers are:

CHARLES J. CONRICK IV

President

Whose address is:

631 Lambton Lane Naples, Florida 34104

MARY CELINE CONRICK

Vice President

Whose address is:

631 Lambton Lane Naples, Florida 34104

MARY CELINE CONRICK

Secretary

Whose address is:

631 Lambton Lane Naples, Florida 34104

CHARLES J. CONRICK IV

Treasurer

Whose address is:

631 Lambton Lane

Naples, Florida 34104

ARTICLE VIII

The name of the first directors are:

CHARLES J. CONRICK IV

Whose address is:

631 Lambton Lane

Naples, Florida 34104

MARY CELINE CONRICK

Whose address is:

631 Lambton Lane

Naples, Florida 34104

ARTICLE IX

The undersigned being the original subscriber to the capital stock hereinbefore named, for the purpose of forming a corporation, to do business within and without the State of Florida, and pursuant to the laws of the State of Florida, does make and file these Articles of Incorporation, hereby declaring and certifying that the facts herein stated are true, and does

respectfully agree to take the number of shares	hereinbefore set forth, and accordingly has
hereunder set his hand and seal, this	day of July, 1996.
WITNESSES:	
Mackeler Cock Winess #1 Mary Caliber Congress	$\mathcal{L}(\mathcal{L}(\mathcal{L}))$
Witness #1	CHARLES I CONRIGK-IV
Printed Name of Witness #1	631 Lambton Lane
Printed Name of Witness #1	Naples, Florida 34104
Wilness #2	
Ment Villing	
(Printed Name of Witness #2	
STATE OF FLORIDA	
COUNTY OF COLLIER	
administer oaths and take acknowledgements, per	who [] produced a driver's license as a strument/and acknowledged before me that he
WITNESS my hand and official seal in t day of July, 1996.	he State and County aforementioned this 10H1
	Java M. Messlein
	Notary Public
	Printed Name of Notary:
	My Commission Expires:

Tara N. Nessiski MY COMMUSSION & CC300987 EXPIRES October 11, 1999 BONDED THRU TROY FAM INSURANCE, INC. the foregoing Certificate for the uses and purposes therein set forth.

WITNESSETH my hand and official seal in the State and County aforementioned this day of July, 1996.

Notary Public

Printed Name of Notary: My Commission Expires:

Tara N. Nessiein My Coamission & CC500987 Expires October 11, 1999 Bonged There Troy fam insurance, inc. CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON 2 PH 1: 24 WHOM PROCESS MAY BE SERVED.

TALLAHASSEE, FLORIDA

Pursuant to Chapter 48.092, <u>Florida Statutes</u>, the following is submitted in compliance with said Act:

FIRST: That, WEALTH RETIREMENT ASSET PROTECTION, INC., desiring to organize under the laws of the State of Florida with its temporary principal office as indicated in the Articles of Incorporation at the City of Naples, County of Collier, State of Florida, has named HENRY PAUL JOHNSON, ESQ. as its agent to accept service of process within this State.

ACKNOWLEDGEMENTS:

Having been named to accept service of process for the above stated corporation, at 6736 Lone Oak Boulevard, Naples, Florida 34109, I, HENRY PAUL JOHNSON, hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

Date

HENRY PAUL JOHNSON

STATE OF FLORIDA COUNTY OF COLLIER

I HEREBY CERTIFY that on this day, before me, an officer duly authorized to administer oaths and take acknowledgements, personally appeared HENRY PAUL JOHNSON who is personally known to me and upon being duly sworn, stated that he signed and executed