# 99(00)00 70/0

Department of State Division of Corporations P. O. Box 6327 Tallahassae, FL 32314

		フィケハション、フ name - must Include su	(ffx) 2:000 -08/2:	179601059004 179601059004 178.75 *****78.75
Enclosed is an original for :  \$70.00 Filling Fee	and one (1) co  \$78.75 Filing Fee & Certificate	py of the articles of  \$122.50  Filing Fee & Certified Copy .	incorporation and \$131.25 Filing Fee, Certified Copy & Certificate	a check
FROM:	Account Name	Twh Systems  18 (printed or typed)	Jechnology T.	Nc
	Address Polycl			
	City, State & Zip			
	407 Daytir	u77 - 8575 ne Telephone number		

NOTE: Please provide the original and one copy of the articles.

### ARTICLES OF INCORPORATION

The undersigned incorporators, for the purposes of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be: Robert S. Johnson, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7224 Spring Villa Circle Orlando, FL 32819

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Hundred (100) shares of Common Stock

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Robert S. Johnson 7224 Spring Villa Circle Orlando, FL 32819

# ARTICLE V INCORPORATORS

The names and street addresses of the incorporators to those Articles of Incorporation are:

Robert S. Johnson 7224 Spring Villa Circle Orlando, FL 32819

The undersigned incorporator(s) have executed these Articles of Incorporation this thirty-first day of July, 1996.

Signature

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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:

Robert S. Johnson Inc.

2) The name and address of the registered agent and office is:

Robert S. Johnson 7224 Spring Villa Circle Orlando, FL 32819

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)