

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

600001969076 -10/09/36--01044--003 *****78.75 *****78.75

VARIABLE OPERATIONS MANAGMENT INC. SUBJECT: (Proposed corporate name - must include suffix) Enclosed is an original and one(1) copy of the articles of incorporation and a check for : **\$78.75 5**70.00 **D**\$122,50 **\$131.25** Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate & Certified Copy Certified Copy & Certificate ADDITIONAL COPY REQUIRED ۱

 Robert P. Gates III

 Name (Printed or typed)

 1985 Rue La Fontaine

 Address

 Address

 Navarre F1. 32566

 City, State & Zip

 (904) 939-1170

 Daytime Telephone number

I B. PEGISTER OCT 1 1 1996,

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

ARTICLES OF INCORPORATION of VARIABLE OPERATIONS MANAGEMENT INC.

The undersigned, acting as incorporator of a Florida corporation pursuant to chapter 607, Florida Statutes (Florida Business Corporation Act), hereby adopts the following articles of incorporation:

ARTICLE I - NAME

The name of the corporation shall be :

VARIABLE OPERATIONS MANAGEMENT INC.

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ARTICLE II - PRINCIPAL OFFICE

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

1985 Rue La Fontaine Er Navarre, Fl. 32566

ARTICLE III - SHARES

The numbers of shares of stock that this corporation is authorized to have outstanding at any one time is : 7,500 shares of common stock at a par value of \$1.00

ARTICLE IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and street address of the initial registered agent is :

Robert P. Gates III 1985 Rue La Fontaine Dr Navarre, Fl. 32566

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ARTICLE V - INCORPORATOR

The name and street address of the incorporators to these Articles of Incorporation are :

Robert P. Gates III 1985 Rue La Fontaine Dr. Navarre, Fl. 32566

Stephenie H. Gates 1985 Rue La Fontaine Dr. Navarre, Fl. 32566

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The undersigned incorporators have executed these Articles of Incorporation this ______ day of October , 1996

Signature Of Incorporator :

Typed Name Of Incorporator Signing , Robert P. Gates III

Signature Of Incorporator :

Typed Name Of Incorporator Signing : Stephenie H. Gates

CERTIFICATE OF DESIGNATION Registered Agent / Registered Office

Pursuant to the provisions of sections 607.0501, 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:

VARIABLE OPERATIONS MANAGEMENT INC.

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

Robert 2: Gates III 1985 Rue La Fontaine Dr Navarre, Fl. 32566



HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE 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 RELATED TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND DO ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE :

Robert P. Gates III

DATE: 10/4/96