P96000095278

TRANSMITTAL LETTER

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

SUBJECT:	OLONIAL ASSET M.	PORT - NAME - MUST include su	
	(Proposed con		
			0002007708- -11/19/96010600 *****78.75 ******7
Enclosed is an original a	and one(1) copy of the artic	cles of incorporation and a	check for
\$70.00 Filing Fee	2 \$78.75 Filing Fee	\$122.50	□ \$131.25
i iiiig i w	& Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy
		,	& Certificate
		ADDITIONAL CO	DV DEUIIDEN
FROM: W	Name (Print		
	Name (Print	ed or typed)	
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s. Kelley GAVE	City, Sta	ic & Zip	
HORIZATION BY PHONE TO THE TANK Treme The sand reme The sand re	(561)994-	5463	ြို့ ထ
at it and rema	(561) 994- ve Daytime Telep	phone number	
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C. EXAMBR	-		مند

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose 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:

COUNTAL ASSET MANAGEMENT, INC.

ARTICLE II PRINCIPAL OFFICE

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

5529 NONTH MILITARY TRAIL # 1504 BOCA RATON, FL 33496 SE NOT 18 PIL 1: 44
STATEA

ARTICLE III SHARES

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

5000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WILLIAM G. Kelley 5529 NORTH MILITARY TRAIL

#1504

Boca RATOR, FL 33496

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

WILLIAM G. KELLEY

PRESIDENT

COLONIAL RESET MANAGEMENT, INC

5529 NORTH MILITARY TRAIL

1504

BOCA LATION, FL 33496

The undersigned	incorporator(s) has(have	e) executed these Articles of Incorporation th
//day of	NOVEMBER	, 19 <u>96</u>
(An additional art	icle must be added if an	effective date is requested.)
	Whilliam,	h, Kellen
		Signature
		Signature
		Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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:	COLONIAL ASSET MANAGEME	m, Inc
2.	The name and address of the regis	tered agent and office is:	
	MILLIAM	G. KELLEY (NAME)	SECRETALLY
	5529 N. / (P.O. Bo)	MILITARY TARIL, #1504 X OF Mail Drop BOX NOT ACCEPTABLE)	18 PH BI
	BOCA RATE	(CITY/STATE/ZIP)	1: 44 STATE ORIDA

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.

Milliam B. Kelley 11/11/96 (SIGNATURE) (DATE)