96 DEC 17 PM 2:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT:	CARMICHAEL		CORPORATION			
	(Proposed	corporate n	ame – must in	clude sumi	<b>X)</b>	
Enclosed is an ori	ginal and one	e (1) copy	of the articles	of incorp	oration ar	nd a check
<b>\$70.00</b>	<b>-X</b> \$78	3.75	<b>\$122.5</b>	50	<b>\$131</b>	.25
Filing Fee	/\Filling Fee & Certificate		Filing Fee & Certified Copy		Filing Fee, Certified Copy	
	a Cer	uncate	or Cerunaa	Copy	& Certific	
Please return the	photocopy to	me with t	the filing date	stamped	on it.	
			•	_	00203 -12/17/96 ******	3 <b>1</b> 1212 01113016 75 *****78.75
FRO	OM:	N. S.	ENNIS			
		Name (	printed or type	d)		
		523 S. Ho	ward Ave St	te 8 <b>-1</b> 9		
		······	Address			
		Tampa, FI	33606			
		City	y, State & Zip			
81 3/251-1220						At 1
		Daytime	Telephone Nu	mber		
Please	Return	in e	uclosed	Pien	ail	1 18190
Please Eu	valore	- The	ma.			181

## Articles of Incorporation

FILED

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1.	The name of the corporation shall be:	
	96 DEC 17 PM 2	
	CARMICHAEL CAPITAL CORPORATION	
2	CARMICHAEL CAPITAL CORPORATION SEUMENTAL OF ST The principal place of business and mailing address of the corporation is EE. FLO	AIL
4.		RUIA
	523 S Howard Ave Ste 8-19	
	Tampa, FL 33606	
3.	3. The corporation shall have the authority to issue <u>25,000</u> shares of st	ock.
	•	
4.	l. The registered agent of the corporation is N. S. Ennis an registered street address is 523 S. Howard Ave Ste 8-19 Tampa	d the
=0	projectored elegate of the 523 S. Howard Ave. Ste. 8-19. Tampa	u uic
Fle	Florida <u>33606</u> .	
5.	5. The initial Board of Directors shall have 1 member(s) whose name(s) and addre	ss(es)
5. is.	5. The initial Board of Directors shall have 1 member(s) whose name(s) and address/are as follows: N. S. Ennis 523 S Howard Ave Ste 8-19 Tampa. FL 33606	ss(es)
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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 am familiar with and accept the obligations of my position as registered agent.

Dated 12/10/96

Registered Agent