

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
TOLL FREE No. 1-800-342-8062
FAX (904) 222-1222

NAME _____
FIRM _____
ADDRESS _____
PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

RE: Mary W. Munce, PA

	C.C. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input checked="" type="checkbox"/> Foreign Corp. File		
<input type="checkbox"/> () Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S-		
<input type="checkbox"/> Fictitious Name File		
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s. _____ Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone () _____		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX () _____ pgs.		

SUBTOTALS _____

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 10% per Annum.

THANK YOU
from
Your Capital Connection

**ARTICLES OF INCORPORATION
OF
MARY W. MONACO, P.A.**

FILED
96 DEC 31 AM 11:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator to these Articles of Incorporation, a natural person competent to contract, for the purpose of forming a corporation under the laws of the State of Florida, hereby adopts the following Articles of Incorporation.

ARTICLE I

NAME OF CORPORATION

The name of this corporation shall be **MARY W. MONACO, P.A.**

ARTICLE II

NATURE OF BUSINESS

The specific nature of this business is to practice law.

ARTICLE III

PRINCIPAL OFFICE

The principal place of business of the corporation in the State of Florida shall be 2210 N.W. 40th Terrace, Suite A, Gainesville, Florida 32605. The mailing address of the corporation in the State of Florida shall be Post Office Box 147050, Gainesville, Florida 32614. The Board of Directors may from time to time move the principal office to any other address in the State of Florida.

ARTICLE IV

PREEMPTIVE RIGHTS

The corporation elects to have preemptive right.

ARTICLE V

CAPITAL STOCK

The minimum number of shares of stock this corporation is authorized to have outstanding at any one time shall be One Hundred (100) shares of common stock at the par value of One Dollar (\$1.00) per share.

ARTICLE VI

INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the corporation is 2210 N.W. 40th Terrace, Suite A, Gainesville, Florida 32605, and the name of the initial registered agent of this corporation at that address is Mary W. Monaco.

ARTICLE VII

DIRECTORS

This corporation shall have not less than one (1) director initially. The number of directors may be increased or diminished from time to time by the bylaws adopted by the stockholders, but shall never be less than one director.

ARTICLE VIII

INITIAL DIRECTORS AND OFFICERS

The name and street address of the initial member of the Board of Directors of the corporation is:

<u>Name</u>	<u>Street Address</u>
Mary W. Monaco	2210 N.W. 40th Terrace Suite A Gainesville, Florida 32605

The name, title and street address of the initial officer who shall hold office during the first year of the corporation's existence or until successors are elected is:

<u>Name</u>	<u>Title</u>	<u>Street Address</u>
Mary W. Monaco	President	2210 N.W. 40th Terrace Suite A Gainesville, Florida 32605

ARTICLE IX

INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

<u>Name</u>	<u>Street Address</u>
Mary W. Monaco	2210 N.W. 40th Terrace Suite A Gainesville, Florida 32605

The undersigned incorporator has executed these Articles of Incorporation this 30th
day of December, 1996.

Mary W. Monaco

**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 its registered agent and registered office in the State of Florida:

1. The name of the corporation is **MARY W. MONACO, P.A.**
2. The name and address of the registered agent and office is:

MARY W. MONACO
2210 N. W. 40th Terrace
Suite A
Gainesville, Florida 32605

Signature: _____

Mary W. Monaco

Title: Registered Agent

Date: _____

12-30-96

FILED
96 DEC 31 AM 11:32
TALLAHASSEE, FLORIDA

ACKNOWLEDGMENT

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept 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.

BY: _____

Mary W. Monaco
**MARY W. MONACO, as the
Registered Agent for
MARY W. MONACO, P.A.**

DATE: _____

12-30-96