7000002423 TRANSMITTAL LETTER

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

(Proposed corporate name - must include suffix)

500002047635-01/07/97-01050-002 *****78.75 *****78.75

Enclo for:	sed is an original	and one (1) co	py of the articles o	f incorporation a	and a chec]
	\$70.00	⊠ \$78.75	\$122.50	\$131.25	
	Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate	
			Additional Copy	y Required	
FROM: Outsource Administrators, Name (printed or typed)					
2119 SE Ft. King Street Address Ocala FL 34471 City, State & Zip					<i>y</i> •
			2 - 732-455 Telephone number	70	

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:

Outsource Administrators, Inc.

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ARTICLE II PRINCIPAL OFFICE

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

2119 SE Ft. King Street Ocala FL 34471

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Raymond N. Strickland, JR. 2119 SE Ft. King Street Ocala, FL 34471

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):

Raymond N. Strickland, Jr. 2119 SE Ft. King Street Ocala, FL 34477

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

3rd day of January , 19 97.

(An additional article must be added if an effective date is requested.)

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:	Outsource Administrators, I	nc.
2. The name and address of the regis	stered agent and office is:	
Raymon	d N. Strickland, Jr.	7 JAN -6
2119 St	E Ft King Street ox or Mail Drop Box NOT ACCEPTABLE)	AH 8:5

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) 1-3-97 (DATE)