

TRANSMITTAL LETTER

P97000012354

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

*effective
1-1-97*

FILED OF STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
97 JAN -7 AM 9:34

SUBJECT: SUZANNE M. HIMES, P.A.
(Proposed corporate name - must include suffix)

W97-841
630

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Suzanne M. Himes, Esq.
Name (Printed or typed)

825 N.E. Second Street
Address

Ocala, Florida 34470
City, State & Zip

(352) 629-5797
Daytime Telephone number

800002049248--6
-01/07/97--01154--006
*****78.75 *****78.75

5/2/97

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

January 13, 1997

SUZANNE M. HIMES, ESQ.
825 N.E. SECOND STREET
OCALA, FL 34470

SUBJECT: SUZANNE M. HIMES, P.A.
Ref. Number: W9700000841

We have received your document for SUZANNE M. HIMES, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6927.

Kathy Hyman
Document Specialist

Letter Number: 397A00001741

Pursuant to the above instructions, the nature of the business of the corporation has been added to the enclosed documents. Please file them accordingly.

Thank-you.

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:

SUZANNE M. HIMES, P.A.

*effective
1-1-97*

ARTICLE II PRINCIPAL OFFICE

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

825 N.E. Second Street
Ocala, Florida 34470

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ARTICLE III SHARES

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

1000 shares of common stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Suzanne M. Himes, Esq.
825 N.E. Second Street
Ocala, Florida 34470

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):

Suzanne M. Himes, Esq.
825 N.E. Second Street
Ocala, Florida 34470

ARTICLE VI EFFECTIVE DATE OF INCORPORATION

Pursuant to Section 607.0203 Fla. Stat., the effective date of incorporation is:

January 1, 1997

ARTICLE VII PURPOSE

Said corporation is a private law practice.

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

3rd day of January, 1997.

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



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 SUZANNE M. HIMES, P.A.

(said corporation is a private law practice)

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

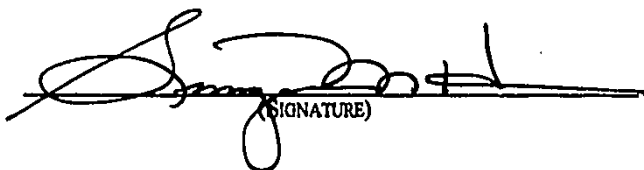
Suzanne M. Himes, Esq.
(NAME)

825 N.E. Second Street
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Ocala, Florida 34470
(CITY/STATE/ZIP)

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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 I am familiar with and accept the obligations of my position as registered agent.


(SIGNATURE)

January 3, 1997
(DATE)