0000 /3. • 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 (Sorvice: Top Priority Regular Two Day Service To us via _____ Return via _ Matter No.: _____ Express Mail No. ____ State Fee \$ _____ Our \$ _____

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11-2529-7 PONDER'S INC., THOMASVILLE, GA.

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ARTICLES OF INCORPORATION

OF

STUCKEY CONSULTANTS, INC.



The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is STUCKEY CONSULTANTS, INC.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 6785 North A-1-A, Fort Pierce, Florida 34949.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares having a par value of (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Samuel A. Block, 2127 Tenth Avenue, Vero Beach, Florida 32960.

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

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

GERALD K. STUCKEY, Pres/Treas/Dir., 500 shares SHARON I. STUCKEY, Secr/Dir, 500 shares 6785 North A-1-A, Fort Pierce, Florida 34949.

The undersigned has executed these Articles of Incorporation this 11th day of February 1997.

"Capital Connection, Inc. by Kim Crosson, Office Manager"

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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:	STUCKEY CO	NSULTANTS, INC	: .
			TALL	97 FE
2. The name office is:	and street address of Samuel A. Block	the regi	stered agen	Band H
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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.

famuel Black