P97000/69/7

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

SUBJECT: Phip	ps and Compar	ny, Inc.		
(P	roposad corporate i	name - must include st	Jffix)	
·			* 3000	020850134)2/12/9701040018 ***131.25 ****131.25
Enclosed is an original for :	and one (1) co	py of the articles o	of incorporation	and a check
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	** \$131.25 Filing Fee, Certified Copy & Certificate y Required	97 FB 97 FB
FROM:	Herbert	Phipps		
	Name (printed or typed)		D BN 12:	
	1357 Arlington Ave.		7 33 ORIDA	
	Gotha; F	Address lorida 34734		.lgM
	City, State & Zip		141/	
•	407-654-4296		21//1/	
	Daytime	Telephone number		1/

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

ARTICLES OF CORPORATION

OF

Phipps and Company, Inc.

The undersigned incorporator hereby forms a corporation under Chapter 607 of of the state of Florida.

ARTICLE I, NAME

The name of the corporation shall be:

Phipps and Company, Inc.

The address of the principal office of this corporation shall be, 1357 Arlington Avenue, Gotha, Florida 34734 and the mailing address of the Corporation shall be the same.

ARTICLE II, CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 5,000 shares of common stock having \$1.00 par value per share.

ARTICLE III, REGISTERED AGENT

The street address of the initial registered office of the corporation shall be, 1357 Arlington Avenue, Gotha, Florida 34734, and the name of the initial registered agent of the corporation at that address is Herbert Phipps.

ARTICLE IV, TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V. INCORPORATOR

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

Herbert Phipps 1357 Arlington Avenue Gotha, FL 34734

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.

	· 6 .		7 TE
1. The name of the corporation is:		Phipps and Company, In	c.
2. The name ar	nd address of the regi	stered agent and office is:	12: 33 STATE FLORIDA
	Herbert	Phipps	
		(Name)	
	1357 Arl	ington Ave.	
•	(P.O. E	ox or Mail Drop Box NOT ACCEPTABLE)	
	Gotha, F	lorida 34734	
		(CITY/STATE/ZIP)	

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.

The Physician (Date) 2 1097 (Date)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314