P9110 (100)

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

SUBJECT:	(proposed corporate	name)	
Enclosed is an origifor \$_70.00	inal and one (1) copy of the - · \$35.00 filing fee - 35.00 registered \$70.00	9	d our check
FROM:	Name (printed or typed) P.O. BOX Address Tislamoraba City, State, & Zip	MARY COLE 704 ,FL 3303(p	13 till 0:29
	(205) (alcH-Li Telephone Number	1462	•

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MAR 11 4; PSP

Note: Please provide the original and one copy of the Articles.

ARTICLES OF INCORPORATION

QE

97 MAR -3 AM 9:29

MITI INC

TALLAGE OF THERIDA

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:

MTI Inc.

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 1704

ISIAMORADA, FL 33036

ARTICLE III CAPITAL STOCK

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Liayne OHO Fitzaian CPA 138 Plantation Ave Tavernier, FL 33070

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

TRACY M JOHNSON MARY M OGIE P.O. BOX 1704 ISIAMORADA, FL 33036

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

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: The name of the corporation is:	
2.	The name and address of the registered agent and office is:	- 91 F
-	Wayne Otto Fitzdon CPA (NAME)	
	138 PICATATION AUE (P.O. BOX NOT ACCEPTABLE)	
	Tavernier F1 33070	
	(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.

DATE _ 2/25/97