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JAMES M. WILKES, CPA, P.C. CERTIFIED PUBLIC ACCOUNTANT 3639 LODGEHAVEN CIRCLE, SUITE 100 GAINESVILLE, GEORGIA 30506 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) ☐ Walk in Pick up time Certified Copy Mail out ☐ Will wait Photocopy Certificate of Status NEW FILINGS AMENDMENTS Profit Amendment Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger

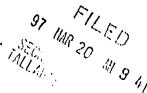
OTHER FILINGS		
Annual Report		
Fictitious Name		
Name Reservation		

学	REGISTRATION/
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

ARTICLES OF INCORPORATION

OF

R. M. Smith & Associates, Inc.



I.

The name of the corporation is R. M. Smith & Associates, Indian

II.

The number of shares the corporation is authorized to issue is 10,000 shares of common stock.

III.

The street address of the initial registered office of the corporation is 3500 Oceanshore Blvd., Flager, Florida 32136 and the inital registered agent of the corporation at such address is Robert M. Smith.

IV.

The name and address of each incorporator is :

Robert M. Smith 3500 Oceanshore Boulvard Flager Beach, FL 32136

The mailing address of the initial principal office of the corporation is:

R. M. Smith & Associates, Inc.

3639 Lodgehaven Circle Suite 100 Gainesville, GA 30506

IN WITNESS WHEREOF, the undersigned has executed these articles of Incorporation.

This 1st day of Much, 1997

Robert M. Smith

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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 nan	ne of the corporation is:	R. M. Smith & Associa	tes, Inc.
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2. The nam	ne and address of the re	gistered agent and office is:	
	Robert M. Smith		او ع
	(Name) 3500 Oceanshore Boulvard		
	(P.C). Box not acceptable)	20 MI
	Flager Beach, FL 32	136	<u> </u>
		(City/State/Zip)	DA E

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.

Sobut Signature 3/1/97