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TO: DIVISION OF CORPORATIONS

FAX #: (904)922-4001

FROM: AL CLARK

ACCT#: 072100000173

CONTACT: AL CLARK  
PHONE: (813)535-4211

FAX #: (813)547-8304

NAME: C.C. MARTIN &amp; ASSOCIATES, INC.

AUDIT NUMBER.....H97000006217

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0

PAGES..... 3

CERT. COPIES.....0

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97 APR 17 AM 8:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## 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.

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TALLAHASSEE, FLORIDA

## ARTICLE I NAME

The name of the corporation shall be: C.C. MARTIN & ASSOCIATES INC

## ARTICLE II PRINCIPAL OFFICE

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

3588 N. SALFORD BLVD.  
NORTH PORT FL. 34286

## ARTICLE III SHARES

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

1000 SHARES  
NO PAR

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

prepared by: CHARES MARTIN

Name:

Address: 3588 N. SALFORD BLVD  
NORTH PORT FL. 34286

Ph#: 941-423-9553

AL CLARK  
12600 S. BRUNNARD  
SUITE 104E  
LARGO FL. 33778

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X *Charles Martin*

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## 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):

CHARLES C. MARTIN  
3588 N. SALKFORD BLVD.  
NORTH PORT FL. 34286

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

16 day of APRIL, 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.

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**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 OFFICE / REGISTERED AGENT, IN THE STATE OF FLORIDA

1. The name of the corporation is: C. C. MARTIN &

ASSOCIATES INC.

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

AL CLARK  
(Name)

12600 S. BELCHER RD SUITE 104E  
(P.O. Box not acceptable)

LARGO FL. 33723  
(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.

AL CLARK  
(Signature)

4-16-97

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

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