P970000050070

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

6000022202666--4 -06/05/37-01040-012 *****78.75 *****78.75

SUBJECT:	RAMAGE-CUMMINS, IN	NC.		
	(Proposed corp	orate name - must include suff	īx)	-
Enclosed is an orig	rinal and one(1) copy of the artic	cles of incorporation and a	check for :	
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
	PY REQUIRED			
FROM: _	DONNA M. KOENER Name (Prin	ated or typed)		
	1717 EAST BRANDON BOULE	VARD	•	
-	Ad	dress		
	VALRICO, FL 33594			
-	City, State & Zip			
	(813) 651_0733 Daytime Tel	ephone number	JUN -5 PH RETAKY OF AHASSEE. I	FILED
		ai JUN = 6.19974	1: 37 STATE FLORIDA	

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.

ARTICLE I NAME

The name of the corporation shall be:

RAMAGE-CUMMINS, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCE TO BE

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

1717 East Brandon Boulevard
Valrico, FL 33594

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

DONNA M. KOENER 1717 East Brandon Boulevard Valrico, FL 33594

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):

DONNA M. KOENER, PRESIDENT 1717 East Brandon Boulevard Valrico, FL 33594

The undersigned in	corporator(s) has(ha	ive) executed these Articles of Incorporation this
25th day of	May	, 19 <u>97</u>
(An additional artic	le must be added if a	an effective date is requested.)
_	Mon	natt foener
_		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.

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.

1. The name of the corporation is_	RAMAGE-CUMMINS, INC.	•	
2. The name and address of the reg	gistered agent and office is:	:	_
	DONNA M. KOENER (Name)	0	
	1717 East Brandon Bo	oulevard FECT	7
(P. C	Box or Mail Drop Box NOT	T ACCEPTABLE)	5 1
	Valrico, FL 33594		30
	(CITY/STATE/ZIP)	FLORI	.3
at the place designated in this cert to act in this capacity. I further ag	ificate, I hereby accept the gree to comply with the pro	e of process for the above stated corporal appointment as registered agent and agovisions of all statutes relating to the profit and accept the obligations of my positions.	gree oper
Suma fragely	Toener/	5/25/97 (DATE)	