

TRANSMITTAL LETTER

P97000066719

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JUL 31 PM 1:06

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

SUBJECT: SILVERWIND SYSTEMS, INC
(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ 20.00.

FROM:

Name

Address

Kiltearn Bookkeeping & Tax Services Inc
332 Howell St.
St. George Island, FL 32228

City, State, & Zip

(904) 922-2806
Telephone Number

300002253453--8
-07/31/97--01020--001
*****70.00 *****70.00

Note: Additional copy of articles is needed only when certified copy is requested.

RP
8-1-97

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JUL 31 PM 1:06

ARTICLES OF INCORPORATION
OF

SILVERWIND SYSTEMS, INC.

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:

SILVERWIND SYSTEMS, INC.

ARTICLE II PRINCIPAL OFFICE

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

*1609 HEDGEFIELD CT.
TALLAHASSEE, FL. 32312*

ARTICLE III CAPITAL STOCK

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

1000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

*PAUL LONDON
332 HOWELL ST.
ST. GEORGE ISLAND, FL. 32328*

ARTICLE V INCORPORATOR(S)

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

MARK TAYLOR 1609 HEDGEFIELD CT.
TALLAHASSEE, FL. 32312

SHERRI TAYLOR 1609 HEDGEFIELD CT.
TALLAHASSEE, FL. 32312

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

30 day of JULY, 19 92.

M. S. H. J. L.

Signature/Title

Sher Taylor

Signature/Title

Signature/Title

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JUL 31 PM 1:06

CERTIFICATE OF DESIGNATION
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: _____

_____ SILVERWIND SYSTEMS, INC. _____

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE

IS: _____ PAUL W. LOMBARD _____

_____ 332 HOWARD ST _____

_____ ST. GEORGE ISLAND, FL. 32328 _____

SIGNATURE M. J. H. J. H.
(CORPORATE OFFICER)

TITLE PRESIDENT

DATE JULY 8, 1997

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF
PROCESS FOR THE ABOVE NAMED 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.

SIGNATURE Paul Lombard

DATE 7/30/97