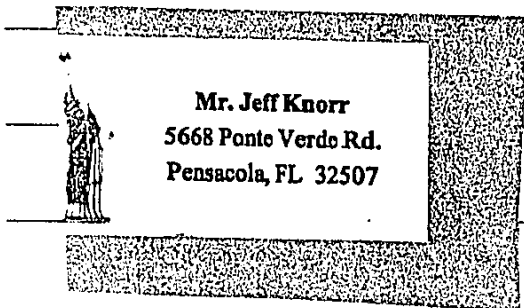


P97000079989



Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. University Mobile Home Park, Inc. (Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Docu Certificate of Status)

4. (Corporation Name) (Docu Certificate of Status)

000002290110--2
-09/11/97--01022--010
*****35.00 *****35.00

- Walk in Pick up time Mail out Will wait Photocopy Certificate of Status

Table with 2 columns: Filing Type, Description. Includes Profit, NonProfit, Limited Liability, Domestication, Other.

Table with 2 columns: Amendment Type, Description. Includes Amendment, Resignation of R.A., Officer/ Director, Change of Registered Agent, Dissolution/Withdrawal, Merger.

300002281513--5
-08/29/97--01107--001
*****35.00 *****35.00

Table with 2 columns: Other Filings, Description. Includes Annual Report, Fictitious Name, Name Reservation.

Table with 2 columns: Registration/Qualification, Description. Includes Foreign, Limited Partnership, Reinstatement, Trademark, Other.

~~1097 20107~~

FILED
97 SEP 15 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dma 8/29/97

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 29, 1997

JEFFREY KNORR
P.O. BOX 34009
PENSACOLA, FL 32507-4009

SUBJECT: UNIVERSITY MOBILE HOME PARK
Ref. Number: W97000020107

We have received your document for UNIVERSITY MOBILE HOME PARK and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$35.00.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The registered agent must have a Florida street address. A post office box is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6923.

Doris McDuffie
Corporate Specialist Supervisor

Letter Number: 497A00043629

ARTICLES OF INCORPORATION

OF

FILED

97 SEP 15 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I NAME

JK

The name of the corporation shall be: UNIVERSITY MOBILE HOME PARK, INC.

ARTICLE II PRINCIPAL OFFICE

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

JK

Place of Business is:

8521 FOWLER AVE
PENSACOLA, FL. 32534

Mailing Address is:

P.O. BOX 34009
PENSACOLA, FL. 32507-4009

5668 PONTE VERDE Rd.

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500

~~100,000 Shares~~ JK

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JEFFREY KNORR
P.O. BOX 34009 5668 PONTE VERDE Rd.
PENSACOLA, FL. 32507-4009

ARTICLE V INCORPORATOR (S)

The names and street addresses of the incorporators to the Articles of Incorporation are: JK

JEFFREY KNORR
P.O. BOX ~~34009~~ 5668 PONTE VERDE Rd.
PENSACOLA, FL. 32507-~~4009~~

The purpose of the corporation is to do whatever business that is legal within the state of Florida, its laws, regulations and statutes.

The undersigned have executed these Articles of Incorporation this 19th day of August, ~~1997~~ 1997.

Jeffrey Knorr, Pres.
Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

FILED

97 SEP 15 AM 10:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the under
signed 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: UNIVERSITY MOBILE HOME PARK, INC.
2. The name and address of the registered agent and office is:
- JEFFREY KNORR
Name
- 5668 PONTE VERDE RD.
PO BOX not acceptable
- PENSACOLA, FL. 32507
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.

Signature
Date

Jeffrey Knorr
8-19-97

REGISTERED AGENT FILING FEE: \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314