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

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| Tallahassee, FL 32314 | *****70.00 ***** |
|---|--|
| | prorate name - must include suffix) THE STATE OF THE STA |
| Enclosed is an original and one(1) copy of the articles of incorporation and a check for: | |
| \$70.00 \$78.75 Filing Fee & Certificate | □\$122.50 \$131.25 Filing Fee Fung Fee, & Certified Copy & Certificate |
| | ADDITIONAL COPY REQUIRED |
| FROM: ROBERT R. FRESMAN Name (Printed or typed) | |
| 173.10 HUBERS C+ | |
| ODESSA PL 33556 /City, State & Zip | |
| Pl3 920-2487 Daytime Telephone number | |

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NOTE: Please provide the original and one copy of the articles.

Articles of Incorporation

Article I: Name

Robert B. Freeman & Associates, Inc.

Article II: Principal Office

The principle place of business and mailing address of this corporation shall be 17310 Hubers Court

Odessa, FL 33556

Article III: Shares

The number of shares this corporation is authorized to have outstanding at anyone time

10,000 shares

Article IV: Initial registered agent and street address

The name and street address of the initial registered agent are:

Diane M. Freeman 17310 Hubers Ct. Odessa, FL 33556

Article V: Incorporator

The name and address of the Incorporator to these Articles of Incorporation are:

Robert B. Freeman 17310 Hubers Ct.

Odessa, FL 33556

Signature/Incorporator

Doto

Date

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

Signature/Registered Agent

Date