P97000101968

PILED DECRETARY OF STATE DIVISION OF CORPORATIONS 97 DEC -1 PM 3: 15

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

700002353527--8 -12/01/97--01147--008 ****131.25 ****131.25

SUBJECT: Irwin & Thompson Services Inc.			
(Proposed corporate name - must include suffix)			
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :			
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate PY REQUIRED
FROM:	Lynn Irwin Denàhan Name (Pr	inted or typed)	<u> </u>
8817 Ashton Ct. Box 20 Address			
	Orlando, FL 32817	State & Zip	
Daytime Telephone number			

κγ 2-3-97

ARTICLES OF INCORPORATION

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

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

Irwin & Thompson Services Inc.

SECRETARY OF STAIL STAIN OF CORPORATIO 97 DEC -1 PM 3: 15

ARTICLE II PRINCIPAL OFFICE

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

8817 Ashton Ct. Box 20 Orlando, FL 32817

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Lynn Irwin Denahan 8817 Ashton Ct. Box 20 Orlando, FL 32817

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Lynn Irwin Denahan 8817 Ashton Ct. Box 20 Orlando, FL 32817

Signature/Incorporator

1-24-97

Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

11-24-5-Date