MAXWELL TAX & ACCOUNTING, INC.

Financial Planning Income Tax Preparation Small Business Accounting



410 - 43rd St. W. Suite H Bradenton, Florida 34209 941-747-8100

December 12, 1997

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 100002372601--0 -12/16/97--01003--010 ****131.25 ****131.25

RE: Incorporation of BLEWS & RITCHIE, INC.

Dear Sir or Madam:

Please file the enclosed Articles of Incorporation for the above-referenced corporation. I have also enclosed a check in the amount of \$ 131.25 which is for the following:

\$ 35.00 Filing Fee

52.50 Certified Copy of Articles of Incorporation

35.00 Registered Agent

8.75 Certificate of Status

\$131.25 Total

If there are any questions please call me at 914-747-8100. Thank you for your attention to this matter.

Sincerely,

Mary L. Maxwell, E.A. 410 43rd St W., Ste H

Bradenton, FL 34209

cc: Peter W. Blews

Cynthia D. Ritchie

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ARTICLES OF INCORPORATION

OF

BLEWS & RITCHIE, INC.

The undersigned incorporators, for the purpose of forming a corporation under the Florida General Corporation Act hereby adopt the following articles of incorporation:

ARTICLE ONE

NAME

The name of the corporation is BLEWS & RITCHIE, INC.

ARTICLE TWO

DURATION

The term of the existence of the corporation is perpetual.

ARTICLE THREE

PURPOSE

The corporation may transact any and all lawful business for which corporations may be incorporated under the Florida General Corporation Act.

ARTICLE FOUR

CAPITAL STOCK

The aggregate number of shares that the corporation has authority to issue is One Hundred (100), all of which will be common shares with par value of One Dollar (\$1.00) per share.

ARTICLE FIVE

REGISTERED OFFICE - PRINCIPAL OFFICE

The street address of the initial registered office of the corporation is 726 11th Ave W., Palmetto, FL 34221.

The address of the principal office is 726 11th Ave W.,

Palmetto, FL 34221. The name of the initial registered agent at that address is Peter W. Blews.

ARTICLE SIX

DIRECTORS

The initial board of directors of the corporation shall consist of two (2) members.

The names and address of the first board of directors are:

NAME ADDRESS

Peter W. Blews 726 11th Ave W. Vice-President/Treasurer Palmetto, FL 34221

Cynthia D. Ritchie 726 11th Ave W. President/Secretary Palmetto, FL 34221

ARTICLE SEVEN

INCORPORATORS

The names and addresses of the incorporators are:

NAME ADDRESS

Peter W. Blews 726 11th Ave W. Palmetto, FL 34221

Cynthia D. Ritchie 726 11th Ave W. Palmetto, FL 34221

IN WITNESS WHEREOF, I have subscribed my name this

11th day of December, 1997.

Peter W. Blews, Incorporator Cynthia D. Ritchie, Incorporator

STATE OF FLORIDA)
COUNTY OF MANATEE)

On this //th day of <u>Necember</u>, 1997, before me, the undersigned officers, personally appeared Peter W. Blews and Cynthia D. Ritchie known to me to be the persons whose names subscribed to the instrument within, and acknowledged they executed the same for the purposes contained therein.

IN WITNESS WHEREOF, I hereunto set my hand and official seal

JOAN L. MCCAW

MY COMMISSION # CC 568403

EXPIRES: July 9, 2000

Bonded Thru Notary Public Underwriters

Notary Public

State of Florida at Large

My commission expires:



97 DEC 16 AM 10: 54

CERTIFICATE DESIGNATING REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statues, 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:	
BLEWS & RITCHIE, INC.	
2. The name and address of the registered agent and office is: PETER W. BLEWS	
726 11th AVE W.	_
PALMETTO, FL 34221	_
SIGNATURE AND	
(corporate officer) TITLE VICE - PRESIDENT	
DATE /2/11/97	
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 AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATIVE 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) DATE	_