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TRANSMITTAL LETTER

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



	BEF -	-
SUBJECT: TEAM (P	CONCEPTS & ASSOCIATES, INC. Proposed corporate name - must include suffix)	
	3000023998 -01/14/98010 ******70.00 **	4 3! 66001 ****70.00
Enclosed is an original for: \$70.00 Filing Fee	and one (1) copy of the articles of incorporation and a check \$78.75 \$122.50 \$131.25 Filing Fee & Certified Copy & Certified Copy & Certificate	
FROM:	Professional Business Solutions, I Name (printed or typed) P. O. Box 50364 Address	NC,
	Jacksonville Beach, FL 32240-0364 City, State & Zip (904) 247-8321 Daytime Telephone number	

F. CHESSER JAN 1 5 1998

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

ARTICLES OF INCORPORATION

Team Concepts & Associates, Inc.

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

ARTICLE I - NAME

The name of the corporation is: TEAM CONCEPTS & ASSOCIATES, INC.

ARTICLE II - Principal Office

The address of the principal office and mailing address of the Corporation is 1768 Beach Avenue, Atlantic Beach, Florida 32233.

ARTICLE III - SHARES

The maximum number of shares of stock which this Corporation is authorized to have outstanding at any one time is five hundred (500) shares of common stock having a par value of \$ 1.00 per share.

ARTICLE IV - Initial Registered Agent and Street Address

The street address of the Corporation's initial registered office is 1125 13th Avenue North, Jacksonville Beach, Florida, 32250. The name of this Corporation's initial registered agent is Michealyn C. Adams.

ARTICLE V - Incorporator

The name of the incorporator to these Articles of Incorporation is:

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

Date