P98000015635

TRANSMITTAL LETTER

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



SUBJECT: Select Investment Services, Inc.

(Proposed corporate name - must include suffix)

000002431910--5 -02/16/98--01109--024 ****122.50 ****122.50

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

□ \$70.00 □ \$78.75 □ \$122.50 □ \$131.25

Filing Fee & Filing Fee & Filing Fee,

Certificate Copy Certified Copy &

Certificate

ADDITIONAL COPY REQUIRED

FROM:

Lamar Conerly, Jr.

Name (Printed or Typed)

P.O. Box 175

Address

Destin, Fl 32540

City, State & Zip

(904) 837-5118 F. CHESSER FEB 1 7 1998

Daytime Telephone number

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

ARTICLES OF INCORPORATION

Signature/Incorporator \(\bigcup \) Date
Lamar Conerly, Jr. Post Office Box 175 Destin, Florida 32540 2-12-98
The <u>name and address</u> of the Incorporator to these Articles of Incorporation are:
William T. Pryor, Sr. 151 Mary Esther Blvd, Ste. 401 Mary Esther, Florida 32569 ARTICLE V INCORPORATOR
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are:
time is: 7500
The number of shares of stock that this corporation is authorized to have outstanding at any one
151 Mary Esther Blvd., Ste. 401 Mary Esther, Florida 32569 ARTICLE III SHARES
The principal place of business and mailing address of this corporation shall be:
The name of the corporation shall be: Select Investment Services, Inc. 2
ARTICLE I NAME
The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation

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

Having been named as registered agent and to accept services 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