TRANSMITTAL LETTER

P98000019020

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

VISION OF CORPORATION

98 FEB 26 AM 8: 45

SUBJECT:

COMPTON TIMBER SERVICES INC.

(Proposed corporate name - must include suffix)

100002441711--4 -02/26/38--01072--006 *****78.75 *****78.75

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

□ \$131.25 Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM:

JOHN M. COMPTON

Name (Printed or typed)

215 MAGNOLIA ROAD

Address

PERRY , FLORIDA 32347

City, State & Zip

850-584-5465 or 838-0246

Daytime Telephone number

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.

ARTICLE I NAME

The name of the corporation shall be:

COMPTON TIMBER SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

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

215 MAGNOLIA ROAD PERRY, FLORIDA 32347

ARTICLE III SHARES

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

100 Shares

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

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

JOHN M. COMPTON 215 MAGNOLIA ROAD PERRY, FL. 32347

INCORPORATOR

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

JOHN M. COMPTON 215 MAGNOLIA ROAD PERRY, FLORIDA 32347

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

2-18-98

Date