P980000 20343

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

SUBJECT:	CCS, Inc.	orporate name - must include	e suffix)
		. · · · · · · · · · · · · · · · · · · ·	0 0002444614 -03/02/980115701! ****122.50 ****122.
Enclosed is an original a	and one(1) copy of the articl	es of incorporation and a	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL COPY REQUIRED	
FROM: _	John D. Name (F	**	
-	4411 Bee 8	Sidge Rd S	3vite 486
-	Sarasota, Fl	34233 State & Zip	
m ³ 3 98	941-745- Daytime	Telephone number	98 MAR -2 PM 2: 15 SECRETARY OF STATE TALLAHASSEE, FLORID,

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

FILED

ARTICLES OF INCORPORATION

98 MAR -2 PM 2: 14

SECRETARY OF STATE

Business Corporation Act, hereby adopts the following Articles of Incorporation.

SECRETARY OF STATE

Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I	<u>NAME</u>	_	
The name of the	corporation shall be:		1-

NCCS, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4411 Bee Ridge Rd, Suite 486 Sarasota, Fl 34233

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

DARIENE S. Abugh 4411 Bee Ridge Rd. Suite 486 Sarasota, Fl 34233

ARTICLE V INCORPORATOR

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

John D. Mough 411 Bee Ridge Rd. Suite 486 Sanasota, FI 34233

Signature/Incorporator

2/27/98 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 Date