Department Star

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

SUBJECT :

SAMLYN, INC.

(Proposed corporate name -must include suffix)

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

\$78.75 Filing fee and Certificate

FROM : LYNN M. MILES (Name)

885 SE 47TH TERRACE (Address)

CAPE CORAL, FLORIDA 33904 (City, State & Zip)

941-542-8888 Daytime Telephone number

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

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ARTICLES OF INCORPORATION

The undersigned incorporator(s) for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be :

SAMLYN, INC.



ARTICLE II PRINCIPAL OFFICE

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

885 SE 47TH TERRACE CAPE CORAL, FL 33904

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LYNN M. MILES 885 SE 47TH TERRACE CAPE CORAL, FLORIDA 33904

ARTICLE V INCORPORATOR(S)

See Instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of the Incorporation is (are):

LYNN M. MILES 885 SE 47TH TERRACE CAPE CORAL, FLORIDA 33904

The undersigned incorporator(s) has (have) executed these
Articles of Incorporation this:
11th day of March 1998
(An additional article must be added if an effective date is requested)

Signature M Miles

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, 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: SAMLYN, INC.
- 2. The name and address of the registered agent and office is:

LYNN M. MILES 885 SE 47TH TERRACE CAPE CORAL, FLORIDA 33904

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.

hym M Miles

Date

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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