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

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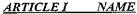
			亦亦亦亦亦(a)。〔b〕	本本本本本 (〇. 1〇
SUBJECT:	Samuel A. R (Proposed corpor	oach, P.A. ate name - must include suf	ffix)	÷ . ∸
m 1 12 au actaine	1 4 (1) conv of the esticles	of incorporation and a	check for :	CTIVE DATE
Enclosed is an original \$70.00 Filing Fee	al and one(1) copy of the articles \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate	
FROM:	Samuel A. R. Name (P) Century Plaza, Suite A	rinted or typed)	98 MAR 23	
	Mount Dora, Flor City,	ida 32757 State & Zip	EE, FLORIDA	

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

Daytime Telephone number

22

ARTICLES OF INCORPORATION AS A PROFESSIONAL ASSOCIATION



The name of the professional association shall be Samuel A. Roach, P.A.

PRINCIPAL OFFICE

The principal place of business and mailing address of this professional association shall be: Century Plaza, Suite 9, 17521 U.S. Highway 441, Mount Dora, Florida, 32757.

ARTICLE III SHARES

The number of shares of stock that this professional association is authorized to have outstanding at any one time is: One (1).

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Samuel A. Roach, Century Plaza, Suite 9, 17521 U.S. Highway 441, Mount Dora, Florida, 32757.

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation as a Professional Association are: Samuel A. Roach, Century Plaza, Suite 9, 17521 U.S. Highway 441, Mount Dora, Florida, 32757.

ARTICLE VI SPECIFIC PURPOSE

The sole and specific purpose of this professional association is to render professional legal services.

ARTICLE VII EFFECTIVE DATE

The effective date of this professional association is April 1, 1998.

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

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Samuel A. Roach, Registered Agent