

P98000030797

TRANSMITTAL LETTER

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

400002475314-3
-04/01/98-01060-008
*****70.00 *****70.00

SUBJECT: KABLE ENTERPRISES OF WEST FLORIDA, INC.

(Proposed corporate name - must include suffix)

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

X 70.00

78.75

122.50

131.25

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 APR -1 AM 10:04

FROM: JOHN R. KABLE
Name (printed or typed)

687 ALDERMAN ROAD SUITE 131
Address

PALM HARBOR, FL 34683
City, State & Zip

(813) 413-0681
Daytime Telephone number

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

4-3-98
WS

ARTICLES OF INCORPORATION

OF

KABLE ENTERPRISES OF WEST FLORIDA, INC.

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

FILED OF STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
98 APR -1 AM 10:04

ARTICLE I NAME

The name of the corporation shall be:

KABLE ENTERPRISES OF WEST FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

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

687 ALDERMAN RD SUITE 131
PALM HARBOR, FL 34683

ARTICLE III CAPITAL STOCK

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

100 SHARES NON-PAR

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JAMES H. COLLIER SR.
1102 FUCHSIA DRIVE
HOLIDAY, FL 34691

ARTICLE V INCORPORATOR(S)

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

JOHN R. KABLE
1340 BAYSHORE BLVD
PALM HARBOR, FL 34683

The undersigned has (have) executed these Articles of Incorporation this

__30th__ day of __MARCH__, 1998__

 P__ Signature/Title

____ Signature/Title

____ Signature/Title

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER 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:_____

KABLE ENTERPRISES OF WEST FLORIDA, INC.

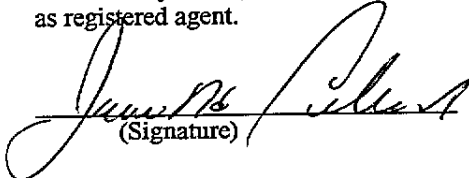
The name and address of the registered agent and office is:

JAMES H. COLLIER SR.
(Name)

1102 FUCHSIA DRIVE
(P. O. Box not acceptable)

HOLIDAY, FL 34691
(City/State/Zip)

I have been named as registered agent and to accept service of process for the aboved 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)

3-30-98
(Date)

FILED STATE
SECRETARY OF CORPORATIONS
98 APR -1 AM 10:04

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