P980000 40268

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

SUBJECT: Milt Wynja, Inc.

I enclose an original and 1 copy of the Articles of Incorporation for the above corporation and a check in the amount of \$122.50.

APPROVED
AND
FILED
98 MAY - 1 AM 7: 47
SECRETARY OF STATE
TALLAHASSEE, FLORID,

ARTICLES OF INCORPORATION Of Milt Wynja, Inc.

ARTICLE I NAME

The name of the corporation shall be: Milt Wynja, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 26363 Stillwater Circle, Punta Gorda, FL 33955

ARTICLE III CAPITAL STOCK

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 ADDRESS

The name and address of the initial registered agent is:

Milt Wynja 26363 Stillwater Circle Punta Gorda, FL 33955

ARTICLE V INCORPORATOR

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

Milt Wynja 26363 Stillwater Circle Punta Gorda, FL 33955

The undersigned has executed these Articles of Incorporation this 27th day of April 1998

,Incorporator Milt Wynja

26363 Stillwater Circle Punta Gorda, FL 33955 APPROVED
FILED
98 MAY - 1 AM 7: 1,7
SECRETARY OF STATE
ARLLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION

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: Milt Wynja, Inc.
- 2. The name and address of the registered agent and office is:

Milt Wynja 26363 Stillwater Circle Punta Gorda, FL 33955

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: Milt Wyya,

Date: 4/27/98

APPROVED
FILED
FILED
SECRETARY OF STATE
SECRETARY OF FLORID