CAPITAL CONNECTION, INC. 417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Signature

Requested by:

Name



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 7, 1998

CAPITAL CONNECTION, INC. 417 E. VIRGINIA ST. STE. 1 TALLAHASSEE, FL 32301

SUBJECT: WILLIAM SNYDER, P.A.

Ref. Number: W98000010404

We have received your document for WILLIAM SNYDER, P.A. and your check(s) totaling \$140.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6929.

Randali Purintun Document Specialist

Letter Number: 898A00025393

ARTICLES OF INCORPORATION

FILED
SECRETARY OF STATE
PRISON OF CORPORATIONS
98 MAY -8 PM 12: 43

OF

WILLIAM SNYDER, P.A.

ARTICLE I - NAME

The name of this corporation is WILLIAM SNYDER, P.A.
The specific of nature of business of for Real Estate Sales.

ARTICLE II - DURATION

This corporation shall exist perpetually.

ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any and all lawful business.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 100 shares of common stock having a par value of \$1.00. There shall be only one class of stock.

ARTICLE V - PREEMPTIVE RIGHTS

Every shareholder, upon the sale of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The name of the initial registered agent of this corporation and the street address of the initial registered office of this corporation are as follows:

WILLIAM SNYDER, 15625 CHARTER OAKS TRAIL, CLERMONT, FLORIDA

34711. The principal office address for the corporation is the same.

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director initially. The number of Directors may be either increased or diminished from time to time by the By-Laws but shall never be greater than (9) nine. The name and address of the initial director of this corporation is:

WILLIAM SNYDER

P.O. Box 951 Clermont, FL 34712

ARTICLE VIII - OFFICERS

The officers of the corporation shall be a President and a Secretary/Treasurer who shall be elected annually and any other officers provided for in the By-Laws. The Secretary and Treasurer may be two offices. The name of the persons who are to serve as officers of the corporation until the first election are:

OFFICER
President/Vice President

NAME AND RESIDENCE William Snyder P.O. Box 951 Clermont, FL 34712

William Snyder P.O. Box 951 Clermont, FI 34712

ARTICLE IX - INCORPORATORS

The name and address of the person signing these Articles are WILLIAM SNYDER, P.O. BOX 951, CLERMONT, FLORIDA 34712.

IN WITNESS WHEREOF, the undersigned incorporators have executed these Articles of Incorporation this 27 day of April, 1998

WILLIAM SNYDER

STATE OF FLORIDA) : SS. COUNTY OF LAKE)

Before me, a Notary Public, duly authorized to take acknowledgments in the state and county set forth above, personally appeared WILLIAM SNYDER, known to me to be the person who executed the foregoing Articles of Incorporation, and she acknowledged before me, that she executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county named above this 29 day of April, 1998.

Notary Public

My commission expires:

Faggy L. Abraham MY COMMISSION # CC591595 EXPIRES September 2, 2000 BONDED THRU TROY FAIR INSURANCE, INC. Secretary of State State of Florida Tallahassee, FL 32399

I hereby am familiar with and accept the duties and responsibilities as resident agent for WILLIAM SNYDER, P.A. effective with the date of this incorporation. I will continue to act and serve in that capacity until such time as I notify you of my resignation from that function.

WILLIAM SNYDER

Attest:

WILLIAM SNYDER

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