P9800051471 (SAMPLE LETTER OF TRANSMITTAL)

DIVISION OF CORPORATIONS

98 JUN -8 PM 1: 2:

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

Re: SCHWEIZER.WALDROFF ARCHITECTS (Name of Corporation) , Inc

DATE

May 29, 1998

100002550504---7 -06/08/98-01022-010 ****122.50 ****122.50

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

C. Kevin Schweizer

SCHWEIZER.WALDROFF ARCHITECTS inc.

(Name of Corporation)

AUTHORIZATION BY PRONE TO
CORRECT AUT IT
DATE 6/9/98
DOC. EXAM DOWN ROWN

P. 0. Box 471206

Lake Monroe, FL 32747

PHONE

(407) 321- 2280 11

Area Code Number Ext.

ARTICLES OF INCORPORATION

of

SCHWEIZER. WALDROFF ARCHITECTS incorporated

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

The name of the corporation is: SCHWEIZER . WALDROFF ARCHITECTS incorporated

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 500 shares of common stock, par value \$ 1.00 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS			
	728 County Road 15		
CITY	Lake Monroe	FLORIDA	ZIP 32747
Mailing address,	if different	:	
STREET ADDRESS			
	P. O. Box 471206		-
CITY	Lake Monroe	FLORIDA	ZIP 32747

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	Charles Kevin Schweizer		
ADDRESS	728 County Road 15	Sight Product	-
CITY	Lake Monroe	FLORIDA	ZIP 32747

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall havetwo_either increased or diminished from time to time by the addresses of the initial director(s) of the corporation a	he By-Laws, but shall never be less tha	he number of directors may be
NAME Charles Kevin Schweizer		President
ADDRESS880 Catfish Avenue	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
CITY New Smyrna Beach	STATE FL	ZIP 32169
NAME Scott D. Waldroff		Vice President
ADDRESS 429 Alpine Street		Treasurer
CITY Altamonte Springs	STATE FL	ZIP 32714
NAME		
ADDRESS		_ =
CITY	- STATE	ZIP
The names and addresses of the incorporators signing	LE VIII - INCORPORATORS g these Articles of Incorporation are as	follows:
NAME Charles Kevin Schweizer		
ADDRESS 880 Catfish Avenue		22160
CITY New Smyrna Beach	STATE FL	ZIP 32169
NAME Scott D. Waldroff		
ADDRESS 429 Alpine Street		
CITY Altamonte Springs	STATE FL	ZIP 32714
NAME	<u> </u>	+
ADDRESS		en e
CITY	STATE	ZIP
The undersigned incorporator(s) have executed day ofMay	0.0	(Signature)
		(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE



SCHWEIZER. WALDROFF ARCHITECTS inco	orporated
(name of corporation	on)
Pursuant to Florida Statutes Sections 48.091 and 607.050	01, the following is submitted:
The above corporation, organized under the laws of the S	State of Florida with its registered office
as indicated in the Articles of Incorporation	
at 728 County Road 15	
Lake Monroe, Florida 3274	7
has named <u>Charles Kevin Schweizer</u>	
located at the aforesaid address, as its registered agent to	accept service of process within this
state.	
Having been named as registered agent and to accept ser	rvice of process for the above stated
corporation at the place designated in this certificate, I h	ereby accept the appointment as regis-
tered agent and agree to act in this capacity. I further agr	ree to comply with the provisions of all
statutes relating to the proper and complete performance	e of my duties, and I am familiar with
and accept the obligations of my position as registered a	igent.
· · · · · · · · · · · · · · · · · · ·	
C. On The	May 29, 1998
(Signature) C. Kevin Schweizer	(Date)
C. REVIII SCHWEIZEL	-