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FLORIDA DIVISION OF CORPORATIONS  
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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.  
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NAME: NICKEL CARE ENTERPRISES, INC.

AUDIT NUMBER.....H98000010727

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

6/10/98



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

June 10, 1998

FAS-T CORP. AGENTS, INC.

SUBJECT: NICKEL ENTERPRISES, INC.  
REF: W98000013268

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

THE CONFLICT IS "NICKEL ENTERPRISES CORP.", DOCUMENT NUMBER J12695.

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Tracy Augsburger  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**

**OF**

**NICKEL CARE ENTERPRISES, INC.**

**ARTICLE I - NAME**

**The name of the Corporation is: NICKEL CARE ENTERPRISES, INC.**

**ARTICLE II - DURATION**

**This corporation shall have a perpetual existence commencing on the Date of Filing.**

**ARTICLE III - PURPOSE**

**This corporation may engage in any activity of business permitted under the laws of the United States and the State of Florida**

**ARTICLE IV - CAPITAL STOCK**

**This corporation is authorized to issue 100 shares of one dollar(\$1.00) par value common stock, which shall be designated "Common Shares"**

**ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT**

**The name and street address of the initial registered office of this corporation is:  
DONALD GARRISON, 514 SW 2nd Ave. Ocala, Fl. 34474**

**The principal Place of business of the Corporation shall be:  
514 SW 2nd Ave., Ocala, Fl. 34474**

**ARTICLE VI - INITIAL BOARD OF DIRECTORS**

**This Corporation shall have one (1) Director initially. The number of Directors may be increased or decreased from time to time by the by-laws, but shall never have less than one (1). The name and address of the initial Director is:**

**Name:  
Donald Garrison  
President**

**Address:  
514 SW 2nd Ave.  
Ocala, Fl. 34474**

**Prepared By: Terrel Hood CPA  
514 SW 2 Ave.  
Ocala, Fl. 34474  
(352) 732-2660**

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**ARTICLE VII - LAWS**

The by-laws of this corporation may be adopted, altered, amended or repealed by either the Stockholder (s) or Director (s)

**ARTICLE VIII - IDEMNIFICATION**

The Corporation shall indemnify any Officer or Director, or any former officer or Director, to the full extent permitted by law.

**ARTICLE IX PREEMPTIVE RIGHTS**

Every Stockholder, upon the sale for cash of any new stock of this Corporation of the same kind, class or series as th which he/she already holds, shall have the right to purchase his/her prorated share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

**ARTICLE X - INCORPORATOR**

The persons signing these Articles is: Donald Garrison 514 SW 2 Ave., Ocala, Fl 34474

**ARTICLE XI - AMENDMENT**

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, in accordance with the provisions of the Florida General Corporation Act.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation, this 8 day of June of 1998



**Donald Garrison  
President**

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**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.

First that NICKEL CARE ENTERPRISES, INC. desiring to organize under the laws of the State of Florida with its principal office, as indicated in the articles of incorporation has named Donald Garrison located at Ocala, Florida, County of Marion, State of Florida, as its agent to accept service of process within this state.

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.

  
Donald Garrison  
Agent

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