TRANSMITTAL LETTER

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

*****70.00

SUBJECT:

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$70.00.

FROM:

THYRICON SERVICES INC.

9420 LAZY LANE TAMPA, FL 33614

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

98 JUN 29 PM 2: 01

ARTICLES OF INCORPORATION

OF

THYRICON SERVICES, INC.

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

ARTICLE 1 NAME

The name of the corporation shall be:

THYRICON SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

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

9420 LAZY LANE TAMPA, FL 33614

ARTICLE III SHARES

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

1000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JAMES O'DONAGHUE 9420 LAZY LANE TAMPA, FL 33614

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Article of Incorporation is(are):

JAMES O'DONAGHUE 9420 LAZY LANE TAMPA, FL 33614

The undersigned incorporator(s) has (have) executed these Article of Incorporation this 23rd day of June, 1998.

Signature
Signature

Article of Incorporation

Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statues, 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: THYRICON SERVICES, INC.
- The name and address of the register agent and office is: 2.

JAMES O'DONAGHUE 9420 LAZY LANE **TAMPA, FL 33614**

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

DATE

REGISTERED AGENT FILING FEE \$35.00

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