P98 TRANSMETAL ETTRO/937

FEDERAL PROCESSING ASSISTANCE ASSOCIATION, CORP.

(Proposed corporate name - must include suffix)

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

SUBJECT:

400002587194 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$131.25 \$78.75 **□**\$122.50 \$70.00 Filing Fee, Filing Fee Filing Fee Filing Fee & Certified Copy Certified Copy & Certificate & Certificate ADDITIONAL COPY REQUIRED DW GOODIN FROM: Name (Printed or typed) (813) 815.0302 Daytime Telephone number

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

M7-14-98

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

FEDERAL PROCESSING ASSISTANCE ASSOCIATION, CORP.

ARTICLE II PRINCIPAL OFFICE

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

9438 US HWY. 19 N. SUITE#146 PORT RICHEY, FL. 34668

ARTICLE III SHARES

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

1000 (ONE-THOUSAND)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

JAMES DW. GOODIN

9438 us HWY. 19 N. SuITE #146

PORT RICHEY, FL. 34668

ARTICLE V INCORPORATOR

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

JAMES DW. GOODIN

9438 US HWY, 19 N. SuiTE# 146

PORT RICHEY, FL 34668

7.7.98

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

1 10

Date