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TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 GARY E. MARTINSON, INC. SUBJECT: (Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$122.50 \$131.25 \$70.00 Filling Fee & Filling Fee & Filling Fee, Filling Fee Certified Copy & **Certified Copy** Certificate Certificate **Additional Copy Required** GARY E. MARTINSON From: Name (printed or typed) 804 WOODLING PLACE Address ALTAMONTE SPRINGS, FL 32701 City, State & Zip (407) 830 - 6422 Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

GARY E. MARTINSON, INC.

SECRETARY OF STATEMS
SINTSION OF CORPORATIONS
98 SEP -8 PM 3: 42

ARTICLE II PRINCIPAL OFFICE

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

804 WOODLING PLACE ALTAMONTE SPRINGS, FL 32701

ARTICLE III SHARES

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

TEN THOUSAND (10,000) SHARES AT ONE DOLLAR (\$1.00) PER SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the inital registered agent is:

GARY E. MARTINSON 804 WOODLING PLACE ALTAMONTE SPRINGS, FL 32701

ARTICLE V INCORPORATOR(S)

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

GARY E. MARTINSON 804 WOODLING PLACE ALTAMONTE SPRINGS, FL 32701

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

23rd day of August, 1998.

Day 2 martinan
Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporatior does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF 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.

1.	The name of the corporation is:GARY_E. MARTINSON, INC.		ಟ
2.	The name and address of the registered agent and office is:	98 SEP	INSIONE!
	GARY E. MARTINSON (NAME)	-8 PM	ARY OF
	804 WOODLING PLACE (PO Box or Mail Drop Box NOT ACCEPTABLE)	3: 42	STATE
	ALTAMONTE SPRINGS, FL 32701 (CITY/STATE/ZIP)		

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 fo my position as registered agent.

You E Jackman 8/23/98 (SIGNATURE) (DATE)