TIMOTHY G. HAYES & ASSOCIATES, P.A.

Attorneys At Law

Lakeview Professional Center 21859 State Road 54, Suite 200 • Lutz, Florida 33549 TIMOTHY G. HAYES
Telephone 813/949-6525 • Fax 813/949-6433

September 23, 1998

P98000087082

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

Re: Mal, INC.

Dear Sir or Madam:

000002649100--1 -09/25/98--01068--003 ******70.00 ******70.00

Enclosed for filing please find the original and one copy of the Articles of Incorporation for the above corporation, along with a check in the amount \$70.00 for the filing fee.

Sincerely yours,

DEBRAH MAYWORTH

Legal Assistant(/ HAYES & ASSOCIATES, P.A.

21859 State Road 54, Suite 200

Lutz, Florida 33549

(813) 949-6525

/dm Encls.

98 OCT 12 AM II: 51
SECRETARY OF STATE
AM I AMASSEE, FLORIDI



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 28, 1998

DEBRAH MAYWORTH 21859 STATE RD. 54, STE. 200 LUTZ, FL 33549

SUBJECT: WILLBANKS, INC. Ref. Number: W98000022074

We have received your document for WILLBANKS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Written approval and clearance of the terms BANK, BANKER, BANC, BANKING, TRUST COMPANY, BANCSHARES, SAVINGS & LOAN ASSOCIATION, SAVINGS BANK, or CREDIT UNION must be obtained from the Division of Banking and Finance, pursuant to section 655.922(2a), Florida Statutes. The address is:

Division of Banking Director's Office 101 E. Gaines St. Fletcher Bldg., 6th Floor. Tallahassee, FL 32399-0350 (850) 488-1111.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6927.

Letter Number: 898A00048508

Tracy Smith Document Specialist

ARTICLES OF INCORPORATION

OF

MMEL, INC.

98 OCT 12 AM II: 5 SECRETARY OF STA TALLAHASSEE, FLORE

The undersigned, acting as incorporator(s) of a corporation pursuant to Chapter 607, Florida Statutes, adopts the following Articles of Incorporation:

ARTICLE I - CORPORATE NAME

The name of this corporation shall be:

MMEL, INC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation are:

1737 Pembrooke Way Lutz, FL 33549

ARTICLE III - CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 400.

ARTICLE IV - INITIAL REGISTERED AGENT AND OFFICE

The name and address of the initial registered agent are:

TROY J. WILLIAMS 1737 Pembrooke Way Lutz, FL 33549

ARTICLE V - INCORPORATORS

The name(s) and street address(es) of the incorporator(s) to these articles of incorporation are:

TROY J. WILLIAMS 1737 Pembrooke Way Lutz, FL 33549

ARTICLE VI - DIRECTORS

This corporation shall have 1 director(s) initially. The number of directors may be either increased or diminished from time to time by the By-Laws but shall never be less than one.

The names and addresses of the initial director of this corporation are as follows:

TROY J. WILLIAMS - Director/President 1737 Pembrooke Way Lutz, FL 33549

DAVID E. BANKS, II - Director/Vice-President 339 Fairfield Gretna, LA 70056

IN WITNESS WHEREOF the incorporator has hereunto set his hand and seal, this _____ day of October, 1998.

TROY J. WILLIAMS

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:

1. The name of the corporation is:

MMEL, INC.

2. The name and address of the registered agent and office is:

TROY J. WILLIAMS 1737 Pembrooke Way Lutz, Florida 33549

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.

TITLE Director/President

DATE 10-8-98

98 OCT 12 AM II: 51
SECRETARY OF STATE
TALLAHASSEE, FLORID