TRANSMITTAL LETTER 2216
P98000 102-324
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SUBJECT: MANAGEMENT Source Consultants, LNC. (Proposed corporate name - must include suffix)
900027036392 -12/04/9801093007 ****128.75 ****128.75
Enclosed is an original and one (1) copy of the articles of incorporation and a check
for: \$70.00 \$78.75 \$\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
FROM: <u>CAPRICE</u> L. RIOPELLE Name (printed or typed)
4400 N. FEDERAI HWY: (SOITE) 210 Address
BOCA RATON FL. 33431 City, State & Zip
Daytime Telephone number

RICHESSER DEC 9 1998

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

Florida Department of State, Sandra B. Mortham, Secretary of State

CERTIFICATE OF DOMESTICATION

The undersigned, CAPRICE LYNN RIOPEILE, PRESIDENT, (Name)
of MANAGEMENT Source Consultants Inc. a foreign Corporation, (Corporation Name)
in accordance with Florida Statutes, section 607.1801 does hereby certify:
1. The date on which corporation was first formed was <u>FEBRUARY 27</u> , 19 96
2. The jurisdiction where the above named corporations was first formed, incorporated, or otherwise came into being was COBIS COUNTY (SEORIA)
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was MANAGEMENT Source Consultants, The Came as Azore
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to ss. 607.0202 and 607.0401 with this certificate is MANAGEMENT SOURCE CONSULTANTS, TNC.
5. The jurisdiction that constituted the seat, siege, social principal place of business or central administration of the corporation, or any other equivalent thereto under applicable law immediately prior to the filing of the Certificate of Domestication was
OEORGIA (COBR CAUNTY)
I am presideNT, of MANAGEMENT Source CONSULTANTS, INC.
and am authorized to sign this certificate of Domestication on behalf of the corporation and have done
so this the \int day of $\frac{0}{8}$ day of $\frac{98}{8}$.
(Authorized Signature)
Filing Fee:
Certificate of Domestication Articles of Incorporation and Certified Copy Total to domesticate and file S50.00 \$122.50
INHS53 (6/96) CHECK PAYABLE TO DEPT. OF STATE

INHS53 (6/96)

ARTICLES OF INCORPORATION

OF



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 I NAME

The name of the corporation shall be:

Management Source Consultants, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4400 North Federal Hwy., Suite 210 Boca Raton, FL 33431

ARTICLE III SHARES

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

The corporation is authorized to issue 10,000 shares of no par value common stock with identical rights and privileges, the transfer of which is restricted in accordance with the Bylaws of the corporation status and the shareholders Agreement of the corporation.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Caprice L. Riopelle 4400 North Federal Hwy., Suite 210 Boca Raton, Fl 33431

MINUTES OF A SPECIAL MEETING OF THE BOARD OF DIRECTORS OF

MANAGEMENT SOURCE CONSULTANTS, INC.

Pursuant to the laws of the state in which this corporation is organized, and its bylaws, a meeting of the Directors of the above named Corporation was held at the offices of the corporation. The meeting was held on the ___23___ day of November at __9:30_AM_wickerMater. Present at the meeting was a quorum of directors, and all have signed their names below. As evidenced by their signatures, the directors hereby waive any meeting notice that may be required. The meeting was duly called to order and the following items of business were resolved.

- 1. It is decided that in the best interest of the stockholders the Corporation should elect federal taxation treatment under Subchapter S of the Internal Revenue Code as provided by the Internal Revenue Service, which would allow the Corporation to be taxed as a partnership, with the income or loss of the Corporation "passing through" to the stockholders. Consent and agreement of the stockholders will be evidenced by their signatures on Federal Tax Form Number 2553, a copy of which shall be included in the records of the Corporation. By electing tax treatment under Subchapter S, the Corporation will be required to use a calendar year with the tax year ending December 31, of each year.
 - 2. All directors hereby approve of the action.

Having concluded all current business, the meeting was duly concluded.

Director Caprice L. Riopelle Macel K. Flenner	President Caprice E. Riopelle Caduna A. Flenner
Director	November 23, 1998

ARTICLE V INCORPORATOR(S)

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

Caprice L. Riopelle 4400 North Federal Hwy., Suite 210 Boca Raton, FL. 33431

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this	
day of November , 19 98 .	
aprile J. Riopelle Signature CAPRICE L. Riopelle	
Signature	
Signature	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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:	· · · · · · · · · · · · · · · · · · ·	
	MANAGEMENT Source	रेक्ट्यार	<u>₩</u>
2.	The name and address of the registered agent and office is:		
	CAPRICE L. RIOPElle	98 DEC SECRETA TALLAHA	=
	4400 N. FEDERAL HUY; SUITE 21 (P.O. Box not acceptable)	SAN FILO	E E
	BOCA RATON, FL 33431. (City/State/Zip)	ATE ATE	2

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.

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LNC.