## P98000105392

Department of State
Division of Corporations
P. 0. Box 6327
Tallahassee, FL 32314

SUBJECT: Management Consulting Resources, Inc.

900002714919--5 -12/17/98--01100--011 \*\*\*\*\*78.75 \*\*\*\*\*\*78.75

Enclosed is an original and one (1) copy of the articles

of incorporation and a check for:

\$70.00 Filing Fee \$78.75

Filing Fee

& Certificate of Status

\$78.75

Filing Fee

& Certified Copy

\$87.50

Filing Fee,

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:

Priscilla L. McReynolds 4379 Walnut Bend Jacksonville, FL 32257

(904) 268-3237

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC 17 AM 8: 58

## 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: Management Consulting Resour	ces, Inc.
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation 1437 San Marco Blvd.  Jacksonville, FL. 32207	
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have time is:  1,000 (One Thousand)	ve outstanding at any one
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADD The name and Florida street address of the initial registered agent are: Priscilla L. McReynolds 1437 San Marco Blvd. Jacksonville, FL. 32207	SEGRETARY OF CORP
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporator to the Incorporator to I	<b>9</b> 254
Musicila MyClipelda Signature/Incorporator	12/16/98 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 obligation of my position as registered agent.

Signature/Registered Agent

Date