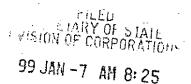
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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

P. O. Box 6327 Tallahassee, FL 32314				
SUBJECT: CA	mpbe// And (Proposed corpora	ASSOCIA + ES ate name - must include suf	S Inc.	
m a st. total		•	00002733 -01/07/990 ****131.25	1701 11053006 *****87.50
Enclosed is an original	and one(1) copy of the articles	or meorporation and a c	AIRCK TOI .	l
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	443 TALAVERA	inted or typed) A ROAD Address	-	-
_	Weston FL	23326 State & 7 in	= _	 . .

HARY OF STATE

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 adopts the following Articles of Incorporation.

ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
443 TALAVERA ROAD Weston FL, 33326
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The page and Florida street address of the initial registered agent are:
The name and Florida street address of the initial registered agent are: Gregory S, CAMPbe // 443 TA/AVETA ROAD Weston FL, 33326
ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:
Gregory S. CAmpbell 443 TAlavera Road Weston FL.33326
Drege Courted 1/4/99 Signature/Inforporator Date
/ Signature/Incorporator Date

The name of the corporation shall be: CAMPbell And ASSOCIATES Inc.

(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

Date