TRANSMITTAL LETTER

P99000004202

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

400002737734--6
-01/12/99--01034--004
*****78.75 *****78.75

SUBJECT: Specialty Consulting Services, Inc.
(Proposed corporate name - must include suffix)

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

☐ $122.50 Filing Fee & Certified Copy

☐ $131.25 Filing Fee, Certified Copy & Certificate

Additional Copy Required

FILED
99 JAN 12 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM: Michael B. Kuknyo
Name (printed or typed)

4513 SW 24th Avenue
Address

Cape Coral, Fl. 33914-6724
City, State & Zip

(941) 542-8606
Daytime Telephone number

F. CHESSER JAN 1 4 1999

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

ARTICLES OF INCORPORATION

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: Specialty Consulting Services, Inc.

FILED
99 JAN 12 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

4513 SW 24th Avenue
Cape Coral, Fl. 33914-6724

ARTICLE III SHARES

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

1000 (One Thousand)
No PAR Value
Commen

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Michael B. Kuknyo
4513 SW 24th Avenue
Cape Coral, FL. 33914

ARTICLE V INCORPORATOR(S)

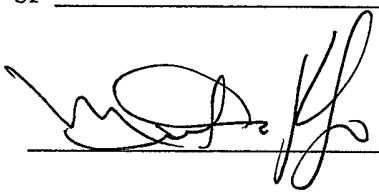
See instructions for officers/directors

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

Michael B. Kuknyo
4513 SW 24th Avenue
Cape Coral, Fl. 33914-6724

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

11th day of January, 19 99.



Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator 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: Specialty Consulting Services, Inc.

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

Michael B. Kuknyo
(NAME)

4513 SW 24th Avenue
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Cape Coral, FL. 33914-6724
(CITY/STATE/ZIP)

FILED
99 JAN 12 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

1-11-99
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314