Department of State The State of State

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

100002756031--6 -01/27/39--01034--009 ---******78.75 ******78.75

SUBJECT:	Panhandle Tran (Proposed corpo	asmission , Inc. rate name - must include su	ffix)	
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 CO	PY REQUIRED	
FROM: Kathy M. Roush Name (Printed or typed)				
	2405 S. Hwy. 77	1	99 . SEC. TALL	<i>y</i>
Address AHASS				
Lynn Haven, F1. 32444				
	_ (850) 271-1050	•	3: 56 STATE JORIDA	
Daytime Telephone number				

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

ARTICLE I.

NAME: Panhandle Transmission , Inc.

ARTICLE II.

NATURE OF BUSINESS:

To engage in any activity or business permitted under the laws of the United States and of this state.

ARTICLE III.

CAPITAL STOCK: 250 Shares

ARTICLE IV.

CAPITAL: \$1,000.00

ARTICLE V.

The Corporation is to enjoy perpetual existence.

ARTICLE VI.

PRINCIPAL OFFICE ADDRESS:

2405 South Hwy. 77 Lynn Haven, Fl.

ARTICLE VII.

DIRECTORS:

The initial Board of Directors consists of two (2), however, the number of directors may be increased or decreased as future conditions dictate.

ARTICLE VIII.

DIRECTORS NAME AND ADDRESS:

Kenneth P. Roush Kathy M. Roush 12020 White Rd. Youngstown, Fl. 32466 ARTICLE VIIII.

INCORPORATOR:

Date

REGISTERED AGENT AND REGISTERED OFFICE:

The registered agents name is: Kathy M. Roush

The registered off ice is located at: 2405 S. Hwy. 77 Lynn Haven, Fl. 32444

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 an accept the obligations of my position as registered agent.

Signature Registered Agent