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

Lawrence H. Flynn, Inc. SUBJECT:

(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 of Status

\$78.75

Filing Fee & Certified Copy \$87.50

Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:	Bay Business Services, Inc.	. · · ·
	Name (Printed or typed)	
×	P.O. Box 3020	. .
	Address	Proposition of the second seco
-	Traverse City, MI 49685-3020	78 F
	City, State & Zip	
	(616)938-0572	2 PM
	Daytime Telephone number	The same
		I: 24 STATE ORIOX

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 I NAME

The name of the corporation shall be:

Lawrence H. Flynn, Inc.

ARTICLE II PRINCIPAL OFFICE

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

2550 Talbot Rd., Fern Park, FL 32730 1655 ALME St., ORlando, FL. 32805 pty

<u>ARTICLE III SHARES</u>

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

50,000 Shares of Common Stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Lawrence H. Flynn, 2550 Talbot Rd., Fern Park, FL 32730

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Lawrence H. Flynn, 2550 Talbot Rd., Fern Park, FL 32730

Signature/Incorporato/

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 obligations of my position as registered agent

Signature/Registered Agent

Date