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POSTOJ, DEAN & HEAVY
Réquestor's Name

LOLLEGE AVE 944 Floor

Address

THI. Fl. 32302 573-0404

City/State/Zip Phone #

Trademark

Other

Office Use Only

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CORPORATION N	NAME(S) & DOCUMENT NUM	BER(S), (if known):
1. KOBES - COOPE	BETZ INC.	cument #)
	ration (Name) (Do	cument #)
2(Corpo	oration Name) (Doc	cument #)
3.		
(Corpo	ration Name) (Doc	cument #)
4		
(Corpo	ration Name) (Doc	eument #)
	1	- (all
Walk in	Pick up time	Certified Copy
Mail out	Will wait Photocopy	Certified Copy Certificate of Status
NEW FILINGS	AMENDMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Officer/Direct	or 0000027927102 -03/03/99-01001012
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	99 SE
Other	Merger	MAR
METER AS A Commission Class of the Commission		
OTHER FILINGS	== REGISTRATION/==	111
Annual Report	- QUALIFICATION	Fig. 4
Fictitious Name	Foreign	PM 4: 40 OF STATE E. FLORID
Name Reservation	Limited Partnership	>
	Reinstatement	

ARTICLES OF INCORPORATION OF Kobes & Betz, Inc.

The undersigned, for the purpose of forming a corporation under the Florida Business Corporation Act, adopt the following articles of incorporation:

ARTICLE ONE NAME

The name of the corporation is Kobes & Betz, Inc.

ARTICLE TWO PRINCIPAL OFFICE

The street address of the initial principal office of the corporation is 9036 Winged Foot Drive, Tallahassee, Florida, 32312.

ARTICLE THREE CORPORATE DURATION

The duration of the corporation is perpetual.

ARTICLE FOUR PURPOSES

The general purpose for which the corporation is organized is to transact any lawful business for which corporations may be incorporated under the Florida Business Corporation Act.

ARTICLE FIVE CAPITALIZATION

The aggregate number of shares which the corporation is authorized to issue is 1,000. Such shares shall be of a since class, and shall have a par value of \$1 per share.

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ARTICLE SIX REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the corporation is 9036 Winged Foot Drive, Tallahassee, Florida, 32312, and the name of its initial registered agent at such address, is Thierry E. Kobes.

ARTICLE SEVEN DIRECTORS

The number of directors constituting the corporation's initial board of directors is three. The name and address of each person who is to serve as a member of the initial board of directors is:

NAME ADDRESS

Thierry E. Kobes 9036 Winged Foot Drive

Tallahassee, FL 32312

Diane M. Kobes 9036 Winged Foot Drive

Tallahassee, FL 32312

Louis Betz Tampa, Florida

ARTICLE EIGHT INCORPORATORS

The name and address of each person who is an incorporator is:

NAME ADDRESS

Thierry E. Kobes 9036 Winged Foot Drive Tallahassee, FL 32312

Executed by the undersigned at Tallahasse, Florida, on 1023,199 [date].

The foregoing instrument was acknowledged before me this day of 7-brane, 1999 by Thierry E. Kobes, who is personally known to me and who did not take an oath.

Notary Public
My commission expires:

RICKY L. POLSTON
COMMISSION & CC 524137
EXPIRES JAN 11, 2000
BONDED THRU
ATLANTIC BONDING CO., INC.

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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 Kobes & Betz, Inc.
- The name and street address of the registered agent and office is: Thierry E. Kobes 9036 Winged Foot Drive Tallahassee, Florida 32312

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.

99 MAR -2 PM 4: 40
SECRETARY OF STATE
TAIL AHASSEE, FLORIDA