33861 Department of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314 INSPECT-ALL, INC (Proposed corporate name - must include suffix) **SUBJECT:** 700002834737--8 -<u>n4/n9/99</u>--01062--013 *****78,75 *****78,75 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : **⊠** \$78.75 \$87.50 **\$78.75** \$70.00 Filing Fee, Filing Fee Filing Fee Filing Fee Certified Copy & Certified Copy & Certificate of Status & Certificate of Status ADDITIONAL COPY REQUIRED FROM: <u>Vic McGee</u> Name (Printed or typed) 4776 BEACON D.R. W. Address $\frac{TACKSONVILLE}{City, State & Zip} = 620 - 6060$ $(904) - 620 - 6025 \quad or \quad (904) = -545$ Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorporate, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I. CORPORATE NAME

The name of this corporation shall be: INSPECT-ALL, INC.

ARTICLE II. PRINCIPLE OFFICE

The principle place of business and mailing address of this corporation shall be 4776 Beacon Dr. W Jacksonville, Florida 32225, County of Duval, State of Florida, but it may have such other offices within or without the State of Florida as may be necessary or convenient.

ARTICLE III. SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1000 shares.

ARTICLE IV: REGISTERED AGENT

The name and Florida street address of the initial registered agent of this Corporation in the State Florida shall be:

> Clyde V. McGee 4776 Beacon Dr. W. Jacksonville, Fl. 32225

ARTICLE V: INCORPORATOR

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

4776 Beacon Dr. W Clyde V. McGee

Jacksonville, Fl. 32225

4/5/99

Clyde V- M 'An Signature/Incorporator

Having been named as registered agent and to accept services 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 a registered agent

Signature/Registered Agent

4/5/

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