P99000 34516 TRANSMITTAL LETTER EFFECTIVE DATE 5-1-99

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

100002837591--2 -04/13/99-01020-010 ******70.00 ******70.00

SUBJECT: L & I Financial Services, Incorporated

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

[X] \$70.00

[] \$78.75

[] \$122.50

[] \$131.25

FROM: Peter Imbrunone
Name (printed or typed)

3602 Altoona Drive
Address

Tallahassee, Florida 32308
City, State & Zip

(727) 847-9755
Daytime Telephone number

SHARON

APR 15 1999

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

ARTICLES OF INCORPORATION

EFFECTIVE DATE

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:

L & I Financial Services, Incorporated <u>Effective 5/1/1999</u>

ARTICLE II PRINCIPLE OFFICE

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

3602 Altoona Drive Tallahassee, Florida 32308

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Peter Imbrunone 3602 Altoona Drive Tallahassee, Florida 32308

ARTICLE V INCORPORATOR(S)

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

Esther Lehmkuhl P.O. Box 13425 Tallahassee, Florida 32317

Peter Imbrunone P.O. Box 13425 Tallahassee, Florida 32317

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

11th day of April 1999.

Signature

Signature

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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: <u>L & I Financial Services, Incorporation Tallahassee, Florida 32308</u>	<u>ted</u>	
2.	The name and address of the registered agent and office is:	* ********	99 AP
	Peter Imbrunone (Name)		RI3 M
	3602 Altoona Drive (P.O. Box not acceptable)		E STA
	Tallahassee, Florida 32308 (City/State/Zip)		RIDA

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)

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