PUMBETEH 3/35

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



SUBJECT

MCG Southeast, Inc.

(Proposed corporate name - must include suffix

500002866836---0 -05/07/99--01058--015 *****78 75 *****78.75

□ \$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:	Tom	PUGNO		
•	Name (Printed or typed)			
í	20012 HURON	fiver of to	Box 129	
	Address			
	LOCKWOOS,	m/ 48(7=	3.0/29	
	City	, State & Zip		
, <u>, , , , , , , , , , , , , , , , , , </u>	(734)-	379,5000		
1 GNO ALOT.	Daytime	Telephone number 10 MAUTHORIZAT CORRECT A	Pugno GAV TON BY PHONE TO	
		DATE	WE TO	
22215 HURON RIVER DRIVE BOX 129 ROCKWOOD MI 48173-0129		DOC. EXAM	112-99	

5/25

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:
MCC Sortheast, Inc. 2003年1
ARTICLE II PRINCIPAL OFFICE
The principal place of hyginess and mailing attacks of the
H25 G. Chickesaw Trail Orlando, Fl. 32825 ARTICLE III SHARES
orlando, F1.22825
ARTICLE III SHARÉS
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
1000 Shares

ARTICLE V	INITIAL REGISTERED	AGENT AND	STREET ADDRESS

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

425 S. CHICKEGAN TRAIL OPL	ANDOFE 3282K
Michael Golden	
ARTICLE VI INCORPORATOR	
The name and address of the Incorporator to these Articles of	of Incorporation are:
Michael Golden, 425 S.	Chickesow hail
M// // Ovlando	Chickesow Trail
	5/1/99
Signature/Incorporator	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