

TRANSMITTAL LETTER

P990000048986

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

000002887610--0  
-05/28/99 --01096--010  
\*\*\*\*131.25 \*\*\*\*\*87.50

SUBJECT: EDB & Associates, Inc.  
(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

☐ \$122.50  
Filing Fee  
& Certified Copy

☒ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: EDWARD D. BABIUCH  
Name (Printed or typed)  
6 POINT VIEW PLACE  
Address  
COCOA, FL 32926  
City, State & Zip  
(407) 634-1946  
Daytime Telephone number

FILED  
99 MAY 26 AM 9:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Ed D Babiuch*

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

*6/1/99*  
*[Signature]*

**ARTICLES OF INCORPORATION  
OF  
EDB & ASSOCIATES, INC.**

**ARTICLE I            NAME**

The name of the corporation shall be:            EDB & Associates, Inc.

**ARTICLE II            PRINCIPAL OFFICE**

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

Principle Address:    6 Point View Place  
                                 Cocoa, FL 32926

Mailing Address:    P.O. Box 68  
                                 Cocoa, FL 32923-0068

**ARTICLE III            SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:            25,000

**ARTICLE IV            INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

Edward Dean Babiuch  
6 Point View Place  
Cocoa, FL 32926

**ARTICLE V            INCORPORATOR**

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

Edward Dean Babiuch  
6 Point View Place  
Cocoa, FL 32926

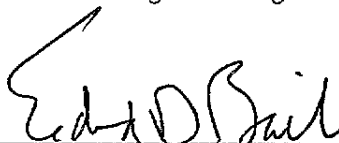


\_\_\_\_\_  
Signature/Incorporator

5/24/99

\_\_\_\_\_  
Date

*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

5/24/99

\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA