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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
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From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
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FLORIDA PROFIT CORPORATION OR P.A.

*Associates*  
MCDONNOUGH ENTERPRISES, INC.

Certificate of Status	0
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FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

June 25, 1999

EMPIRE

Associates

SUBJECT: MCDONNOUGH ~~ENTERPRISES~~, INC.  
REF: W99000014848

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

THE CONFLICT IS MCDONOUGH ENTERPRISES, INC. DOC #P99000012952.

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Becky McKnight  
Document Specialist

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**ARTICLES OF INCORPORATION**

**OF**

**McDonnough & Associates, Inc.**

*These Articles are in compliance with Chapter 607, F.S.*

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**ARTICLE I**

The name of this corporation shall be: McDonnough & Associates, Inc.

**ARTICLE II**

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

**ARTICLE III**

The principal place of business and mailing address of this corporation shall be: 906 N.W. 83 Drive, Coral Springs, Florida 33071

**ARTICLE IV**

The general nature of business of this corporation is to transact any and all lawful business.

**ARTICLE V**

The aggregate number of shares which this corporation shall have authority to issue is the total sum of 1,000 shares having an individual par value of \$ 1.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

PREPARED BY: RAY STORMONT, EMPIRE CORPORATE KIT COMPANY  
1492 W. FLAGLER STREET, #200, MIAMI, FLORIDA 33135 (305)541-3694

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ARTICLE VI

The name and street address of the initial Registered Agent of this corporation shall be: Clarence McDonnough, 906 N.W. 83 Drive, Coral Springs, Florida 33071

ARTICLE VII

The initial board of Directors shall consist of a total of 1 person(s) and the name and address of the person(s) who are to serve as an initial director(s) is(are):


Clarence McDonnough      906 N.W. 83 Drive  
Coral Springs, Fl 33071

ARTICLE VIII

The name and address of the incorporator executing these Articles of Incorporation is:

EMPIRE CORPORATE KIT OF AMERICA, INC.  
1492 W. FLAGLER ST #200  
MIAMI, FL 33135

The undersigned has executed these Articles of Incorporation this 25th day of June, 1999.

  
Incorporator  
Ray Stormont/President  
Signing for  
Empire Corporate Kit of America, Inc.

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CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

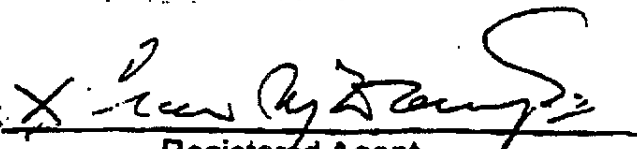
Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

First that McDonnough & Associates, Inc.  
(Name of Corporation)  
desiring to organize under the laws of the State of FLORIDA  
(Florida)  
with its principal office, as indicated in the articles of incorporation has  
named Clarence McDonnough  
(Name of Registered Agent)  
located at 906 N.W. 83 Drive

City of Coral Springs County of Broward State of Florida,  
as its agent to accept service of process within this state.

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

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