



THE UNITED STATES
CORPORATION
COMPANY

P99000060062

ACCOUNT NO. : 072100000032

REFERENCE : 296473 87178A

AUTHORIZATION :

Patricia Piguto

COST LIMIT : \$ 78.75

ORDER DATE : July 2, 1999

ORDER TIME : 2:19 PM

ORDER NO. : 296473-005

CUSTOMER NO: 87178A

900002922809--6

CUSTOMER: Mr. Norman L. Huey
MR. NORMAN L. HUEY
MR. NORMAN L. HUEY
121 Raintree Drive

Longwood, FL 32779

DOMESTIC FILING

NAME: RDS CONSULTING, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janice Vanderslice

EXAMINER'S INITIALS:

TS 7/2/99

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 JUL -2 PM 3:30

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 JUL -2 PM 3:16

RECEIVED

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:

RDS Consulting, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Raintree Drive
Longwood, Florida 32779

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

Norman L. Huey
121 Raintree Drive
Longwood, Florida 32779

ARTICLE V INCORPORATOR

Norman L. Huey
121 Raintree Drive
Longwood, Florida 32779


Signature/Incorporator

7-1-99
Date

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-SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT ACCEPTANCE

Having been named as registered agent and to accept service of process for the above stated corporation, RDS Consulting, Inc., at the place designated in this certificate, 121 Raintree Drive, Longwood, Florida 32779, 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

7-1-99

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA