

P99000061124

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

Proposed Corporate Name: WAKEFIRE PROFESSIONAL SERVICES INC.

Enclosed is one original and one copy of the articles of incorporation for the above named company and a check or money order for:

\$70.00 Filing Fee Only

\$78.75 Filing Fee and Certificate

\$122.50 Filing Fee and Certified Copy of Articles (attach an addtl copy)

\$131.25 Filing Fee, Certified Copy, and Certificate (attach an addtl copy)

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*****78.75 *****78.75

From: Patrick H. Milholland
8787 Southside Blvd #4817
Jacksonville, FL 32256
(904) 543-9935

X Patrick Milholland
Signed

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SECRETARY OF STATE
TALLAHASSEE, FL 07/02/99

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

The name of the corporation shall be Wakefire Professional Services Inc.

Article II

The principal place of business shall be Duval, Jacksonville, Florida. The mailing address shall be 8787 Southside Blvd #4817, Jacksonville, FL 32256.

Article III

The corporation is authorized to have 1000 shares of common stock outstanding at any one time.

Article IV

The initial registered agent shall be Patrick H. Milholland, who resides in Duval and whose business address is 8787 Southside Blvd #4817, Jacksonville, FL 32256.

Article V

The effective date of the corporation shall be June 30, 1999.

Incorporator:

X Patrick H. Milholland 30 Jun 99
Signature Date

X B. [Signature] 6-30-99
Witness Date

PATRICK MILHOLLAND
Printed Name

Registered Agent Acceptance

Wakefire Professional Services Inc.

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the enclosed certificate, I hereby accept the appointment as registered agent and agree to act in that capacity. I further agree to comply with the provisions if 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.

X Patrick Munn
Signature

30-Jul-99
Date

X B. B. B.
Witness

6-30-99
Date

Patrick M. Munn
Printed Name

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TALLAHASSEE, FLORIDA