CAPITAL CONNECTION, INC. 070 ZZO

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Art of Inc. File LITD Partnership File Foreign Corp. File L.C. File Fictitious Name File Art. of Amend. File Art. of Amend. File Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Owner Search Vehicle Search Time Walk-In Walk-In Walk-In Walk-In Walk-In Will Pick Up Courier LC. File Fictitious Name Corp Record Search Courier LTD Partnership File Fictitious Name File Corp. Search Corp. Search	richael T	· Tomlin, P.A.	300002952723—-8 -08/06/9901064019 *****78.75 *****78.75
UCC 11 Retrieval	Requested by:	8/6 10:17	LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Cert. Copy Photo Copy Certificate of Good Standing Certificate of Fictitious Name Corp Record Search Fictitious Search Fictitious Owner Search Vehicle Search Driving Record UCC 1 or 3 File UCC 11 Search
	Walk-In	Will Pick Up	Courier



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 6, 1999

CAPITAL CONNECTION, INC. 417 E. VIRGINIA ST. STE. 1 TALLAHASSEE, FL 32301

SUBJECT: MICHAEL T. TOMLIN, P.A.

Ref. Number: W99000018298

We have received your document for MICHAEL T. TOMLIN, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6929.

Randall Purintun Document Specialist

Letter Number: 399A00039958

ARTICLES OF INCORPORATION 99 AUG -9 AH //: 33

OF

Michael T. Tomlin, P.A.

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 is Michael T. Tomlin, P.A. The specific nature of business for this professional association is to practice law.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 2785 Crystal Ct., Miami, FL 33133.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Michael T. Tomlin, 2785 Crystal Ct., Miami, FL 33133.

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of each member of the initial Board of Directors of the corporation is Michael T. Tomlin, 2785 Crystal Ct., Miami, FL 33133.

The undersigned has executed these Articles of Incorporation this 6th day of August 1999.

"Capital Connection, Inc. by Chris Grunewald, Client Representative"

Chris Grunerale

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE



Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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.

1.	The name of t	the corporation is:_	Michael T. T.	omlin , P.A
		al .		
2. is:	The name and	street address of t	he registered agent	and office
	2785 Cu	ptal Ct.		
		Ha. 33133	,	

HAVE 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 OBLICATIONS OF MY POSITION AS REGISTERED AGENT.

Michael T. Von