August 30, 199

Dept of State Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Incorporation RE:

Dear Sir or Madam:

Enclosed please find my application to setup a Profit Summit Consultants, Ltd. Corporation:

Additionally I have enclosed:

- 2 copies (1 for Certified Articles of Incorporation Ŀ Copy)
- Transmittal Letter 2
- Certificate of Designation of Registered Agent/ Registered · 3 Office
 - A money order in the amount of \$87.50

Please contact me with any questions at 477-8547.

Thank you.

Sincerely

DiGirolamo

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*****87.50 *****87.50

Articles of Incorporation

The undersigned incorporator(s) for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation

Article I Name

The name of the corporation shall be:

Summit Consultants, Inc. =

Article II Principal Office

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

9256 N. Palafox Street Pensacola, FL 32534

Article III Shares

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

Two Hundred $(200)_1$ all which shall be without par value

Article IV Initial Registered Agent and Street Address

The name and address of the initial registered agent is:

Maria DiGirolamo 9256 N. Palafox Street Pensacola: FL 32534

Article V Incorporator

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

Maria DiGirolamo 9256 N. Palafox Street Pensacola, FL 32534

The undersigned incorporator has executed these Articles of Incorporation this 30th day of August 1999.

Maria DiGirolamo

CERTIFICATE OF DESIGNATION OF 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.

1. The name of the corporation is:	Summit Consultants, Inc	<u></u>
2. The name and address of the reg	gistered agent and office is:	
Maria DiGirola	smo SEC 99	
	(NAME)	
9256	N. Palafex St.	
(P.O.	Box or Mail Drop Box NOT ACCEPTABLE)	
Peusac	COLA FL 32534 50 W	

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)

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