P990000 86594 CAPITAL CONNECTION, INC. 7 E Virginia Street Suite 1 & Tallabassa Florida 22202

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

| Allamanda West, Inc. | |
|----------------------------|--|
| | 6000030014056 -09/30/9901039020 *****78.75 *****78.75 |
| | Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File |
| | Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy The statement Sta |
| Signature | Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Owner Search Vehicle Search |
| Requested by: 9/36 /0:12 | Driving Record |

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.

<u>ARTICLE I</u>

The name of the corporation shall be:

Allamanda West, Inc.

ARTICLE II PRINCIPAL OFFICE

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

6840 Gulf of Mexico Drive

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

100

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

James Seccarecció 752 St. Judes Drive Longboat Key, FL 34228

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

James Seccareccio 752 St. Judes Drive

Longboat Key, FL 34228

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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