P.O. Box 1460, Nokomis, FL 34274-1460

Telephone 941/485-0225

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PARISH PA

TRANSMISSION

To: FI Dept of State - Pam Hall

FAX #: 850-487-6804

Date: 10/0

From: John Laudenslager 941-485-0225

225 Pages

Subject: Cabot

As requested, attached are copies of cancelled checks for payment of filing fees for filing the articles of incorporation for the followining corporations:

Check # 4252 dated September 12, 1999 Cabot Management Group, Inc.

Check # 4253 dated September 12, 1999 Cabot Land Trust, Inc. 300002989883--7 -09/17/99--01063--015 *****70.00 ******70.00



ARTICLES OF INCORPORATION

OF

FILED

99 SEP 17 AN IO: 35

SECRETARY OF STATE
TALLAHASSEE FLORISA

CABOT LAND TRUST, INC.

ARTICLE I NAME

The name of the corporation shall be Cabot Land Trust, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be 1029 Delacroix Circle, Nokomis, FL 34275.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000 shares of common stock with no par value.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: John P. Laudenslager, 1029 Delacroix Circle, Nokomis, Florida 34275.

ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: John P. Laudenslager, 1029 Delacroix Circle, Nokomis, FL 34275.

The undersigned incorporator has executed these Articles of Incorporation this 9th day of September, 1799.

John P. Laudenslager

1029 Delacroix Circle, Nokomis, FL 34275

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: Cabot Land Trust, Inc.
- 2. The name of the registered agent and office is:

John P. Laudenslager 1029 Delacroix Circle, Nokomis, Florida 34275

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

DATE 9/9/99

99 SEP 17 AN IO: 35