## P99000094656

TRANSMITTAL LETTER

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

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SUBJECT: Mike Walburn Architecture, Inc.

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00

\$78.75

\$122.50

\$131.25

Filing Fee

Filing Fee

Filing Fee

Filing Fee,

& Certificate & Certified Copy

Certified Copy

& Certificate

## ADDITIONAL COPY REQUIRED

FROM:	Roy Miller, CPA
	Name (Printed or typed)
	8834-14 Goodby's Executive Dr.
•	Address
	Jacksonville, FL 32217
	City, State & Zip
	(904)731-4846
	Daytime Telephone number

SECRETARY OF STATE

NOTE: Please provide the original and one copy of the articles.

## FILED

1999 OCT 26 AM 11: 52

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 NAME

The name of the corporation shall be:

Mike Walburn Architecture, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1525 Berwick Rd. Jacksonville, FL 32207

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Michael E. Walburn 1525 Berwick Rd. Jacksonville, FL 32207

ARTICLE V INCORPORATOR

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

Michael E. Walburn 1525 Berwick Rd. Jacksonville, FL 32207

Simple Transporter

Date

(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

Date