## TRANSMITTAL LETTER

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

900003030419--11/01/99--01073--013 \*\*\*\*\*78.75 \*\*\*\*\*78.75

AND ASSOCIATES OF FLORIDA, INC. (Proposed corporate name - must include suffix)

Enclosed is an original and one(1	copy of the articles of incor	poration and a check for :
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\$70.00

**X** \$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

Filing Fee

\$87.50 Filing Fee,

& Certified Copy Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: MICHAEL D. HINMAN

Name (Printed or typed)

104 RUSTIC DAKS LANE
Address

TACKSONVILLE, FL 32259

City, State & Zip

904-287-8124 Daytime Telephone number

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

W- 25141 De 11/10

## **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:  HINMAN AND ASSOCIATES OF FLORIDA, INC.
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:  104 RUSTIC OAKS LANE, TACKSONVILLE, FL 39259
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at any one time is:  ONE HUNDRED (100)
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are:  MICHAEL D. HINMAN, 104 RUSTIC OAKS LANE DE JACKSONVILLE, FLORIDA 32259
ARTICLE V INCORPORATOR  The name and address of the incorporator to these Articles of Incorporation are:  MICHAEL D. HINMAN, 104 RUSTIL DAKS LANGED TO TACKSONVILLE, FL 32259
Muhie Manuel 10/28/99 Signature/Incorporator 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