99 NOV 15 PM 2:14 TRANSMITTAL LETTER 1001003 Department of State **Division of Corporations** P. O. Box 6327 500003044595 --6 Tallahassee, FL 32314 11/15/99--01126--005 \*\*\*\*\*78.75 \*\*\*\*\*78.75 01d Town management Group Inc. SUBJECT: (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 THOMAS J. CHAPMAN FROM: Name (Printed or typed) 440 GRACE AVE. Address PANAMA CITY, FL32401 City, State & Zip 850-896-3785 Daytime Telephone number

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

D. BROWN NOV 1 6 1999

# 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 NAME</u>

The name of the corporation shall be:

OLD TOWN MANAGEMENT GROUP INC.

### ARTICLE II PRINCIPAL OFFICE

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

440 GRACE AVE.	MAILING ADDRESS
FANAMA CITY, FL 32401	SAME

## ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 10,500 SHARES

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

THOMAS J. CHAPMAN 326 W. 34th CT PANAMA CITY, FL 32405

#### ARTICLE V INCORPORATOR

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

THOMAS J. CHAPMAN	
440 GRACE AVE.	
PANAMA CITY, FL 32401	
$\cdot$ $\cdot$ $\cdot$ $\cdot$	
Amas hannes	,
Signature/Incorporator	
1 / -	

11-4-99 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 new position as registered agent

nguman

11-4-99

Date

Signature/Registered Agent

FILED 99 NOV 15 PM 2: 14 SECRETARY OF STATE TAILAHASSEE, FLORIDA