P 99 000 10216 8 DONALD E. SCHOLL

620 EAST TARPON AVENUE TARPON SPRINGS, FLORIDA 34689

> TEL: (727) 937-3111 FAX: (727) 938-9575



November 8, 1999

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

000003049750—7 -11/19/99—01066—008 *****78.75 *****78.75

Re: PAON MANAGEMENT CORPORATION

Dear Sir(s):

Enclosed for filing with your office, please find proposed Articles of Incorporation for PAON MANAGEMENT CORPORATION and the Certificate Designating Registered Agent. I have also enclosed an extra copy of each to file stamp and return in the enclosed self-addressed stamped envelope at your earliest convenience.

Additionally, I am enclosing my check in the amount of \$78.75 to cover the filing fees for same.

Thank you for your assistance.

Yours truly,

DONALD E. SCHOLL

/cg Enclosures

F. CHESCER NUV 2 2 1999

ARTICLES OF INCORPORATION

OF

PAON MANAGEMENT CORPORATION



The undersigned, PAUL R. FLEAGANE, does hereby make, subscribe, acknowledge and file these Articles of Incorporation for the purpose of becoming a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of this corporation shall be PAON MANAGEMENT CORPORATION.

ARTICLE II. NATURE OF BUSINESS

The corporation is organized for the purpose of transacting any and all other lawful business and is organized to do such other things as are incidental to the foregoing or necessary or desirable in order to accomplish the foregoing.

ARTICLE III. CAPITAL STOCK

The capital stock of this corporation shall consist of 1000 shares of common stock without par value.

ARTICLE IV. TERM OF EXISTENCE

This corporation shall have perpetual existence.

ARTICLE V. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered agent and principal office of this corporation is 39650 U.S. Hwy. 19 N. Unit 1011, (P.O. Box 1119) Tarpon Springs, Florida 34688 and the name of the initial registered agent of this corporation at that address is PAUL R. FLEAGANE.

ARTICLE VI. MANAGEMENT OF BUSINESS

All corporate powers shall be exercised by and under the authority of, and the business and affairs of this corporation shall be managed under, the direction of the shareholders of this corporation. This corporation shall have no directors.

ARTICLE VII. INCORPORATORS

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

PAUL R. FLEAGANE 39650 U.S. Hwy. 19 North - Unit 1011 P.O. Box 1119 Tarpon Springs, Florida 34688

IN WITNESS WHEREOF, the undersigned has set his hand and seal and acknowledged these Articles of Incorporation and directs that they be delivered

to the Department of State for the State of Florida, this $\underline{\underline{8}}$ day of November, 1999.

PAUL R. FLEAGANE

Incorporator

STATE OF FLORIDA

COUNTY OF PINELLAS

WITNESS my hand and official seal at TARPON SPRINGS, PINELLAS COUNTY, STATE OF FLORIDA, this day of November, 1999.

DONALD E. SCHOLL
MY COMMISSION # CC 763029
EXPIRES: 09/15/2002

1-800-3-NOTARY Fla. Notary Services & Bonding Co

Notary Public

My Commission Expires:

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with Section 48.091, Florida Statutes, the following is submitted:

PAON MANAGEMENT CORPORATION, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at 39650 U.S. Highway 19 N. Unit 1011, P.O. Box 1119, Tarpon Springs, Florida 34688, has named PAUL R. FLEAGANE, whose residence is located at 39650 U.S. Highway 19 N. Unit 1011, P.O. Box 1119, Tarpon Springs, Florida 34688, as its agent to accept service of process within Florida.

Signature:

PAUL R. FLEAGANE

Title: Incorporator

Date:

11-8-99

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Registered Agent - PAUL R. FLEAGANE

11-8-99 Date