

P910000056611

CARL Perkins  
Requestor's Name

805 Foster Rd  
Address

Hollandale FL 33009  
City/State/Zip

Phone #

954-457-3738

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. JECARA Inc  
(Corporation Name)

(Document #)

2. \_\_\_\_\_  
(Corporation Name)

(Document #)

3. \_\_\_\_\_  
(Corporation Name)

(Document #)

4. \_\_\_\_\_  
(Corporation Name)

(Document #)

FILED  
95 JUL -5 AM 10:01  
TALLAHASSEE, FLORIDA

☒ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of \$100.00 1884903

-07/05/96--01035--007  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit            |
| <input type="checkbox"/>            | NonProfit         |
| <input type="checkbox"/>            | Limited Liability |
| <input type="checkbox"/>            | Domestication     |
| <input type="checkbox"/>            | Other             |

| AMENDMENTS               |                                        |
|--------------------------|----------------------------------------|
| <input type="checkbox"/> | Amendment                              |
| <input type="checkbox"/> | Resignation of R.A., Officer/ Director |
| <input type="checkbox"/> | Change of Registered Agent             |
| <input type="checkbox"/> | Dissolution/Withdrawal                 |
| <input type="checkbox"/> | Merger                                 |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

RECEIVED  
JUL -5 PM 3:47  
DIVISION OF CORPORATION

SAS  
7/5/96

**ARTICLES OF INCORPORATION**

**OF**

FILED

96 JUL -5 AM 10:01

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

*TERCARA Inc*

**ARTICLE II PRINCIPAL OFFICE**

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

*805 Foster Rd  
Hollandale, FL 33009*

**ARTICLE III CAPITAL STOCK**

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

*500*

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

The name and address of the initial registered agent is:

*CARL PERKINS  
3912 SW 28 ST  
Hollywood, FL 33023*

**ARTICLE X INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

CARL PERKINS - 3912 SW 28 ST  
President Hollywood, FL 33023

JOAN COOPER - 4442 SW 18 ST  
Treasurer Hollywood, FL 33023

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

5<sup>th</sup> day of July, 19 96.

Carl Perkins  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

Articles of Incorporation  
Filing Fee - \$35

**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: TERCARA INC

2. The name and address of the registered agent and office is:

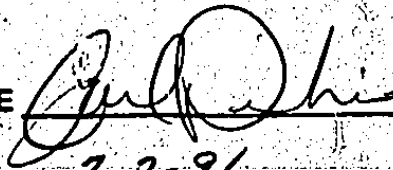
CARL L PERKINS  
(NAME)

3912 SW 28 ST  
(P.O. BOX NOT ACCEPTABLE)

Hollywood FL 33023  
(CITY/STATE/ZIP)

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

7-2-96

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUL -5 AM 10:01

FILED

REGISTERED AGENT FILING FEE: \$35.00