

96000087719

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904) 224-0070  
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
TOLL FREE No. 1-800-342-8062  
FAX (904) 222-1222

NAME \_\_\_\_\_  
FIRM \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
One Day Service \_\_\_\_\_ Two Day Service \_\_\_\_\_

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Mailor No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

RE: Am Hlinka Inc.

☒ Capital Express™  
☐ Art. of Inc. File  
☐ Corp. Record Search  
☐ Ltd. Partnership File  
☐ Foreign Corp. File  
☒ ( ) Cert. Copy(s) Photo  
☐ Art. of Amend. File  
☒ Dissolution/Withdrawal G/S  
☐ C U S.  
☐ Fictitious Name File

☐ Name Reservation 600001984366--E  
☐ Annual Report/Reinstatement 10/24/96-DT020--014  
☐ Reg. Agent Service \*\*\*\*\*78.75 \*\*\*\*\*78.75  
☐ Document Filing

☐ Corporate Kit  
☐ Vehicle Search  
☐ Driving Record  
☐ Document Retrieval

☐ UCC 1 or 3 File  
☐ UCC 11 Search  
☐ UCC 11 Retrieval  
☐ File No.'s. \_\_\_\_\_ Copies

☐ Courier Service  
☐ Shipping/Handling  
☐ Phone ( )  
☐ Top Priority  
☐ Express Mail Prep.  
☐ FAX ( ) pgs.

SUBTOTALS \_\_\_\_\_

FEE.....  
DISBURSED.....  
SURCHARGE.....  
TAX on corporate supplies.....  
SUBTOTAL.....  
PREPAID.....  
BALANCE DUE.....

Please remit invoice number with payment  
TERMS: NET 10 DAYS FROM INVOICE DATE  
1 1/2% per month on Past Due Amounts  
Past 30 Days 10% per Annum

THANK YOU  
from  
Your Capital

REQUEST TAKEN CONFIRMED APPROVED  
DATE \_\_\_\_\_  
ME \_\_\_\_\_  
CK No. \_\_\_\_\_  
10/24 12:00  
10/24

## ARTICLES OF INCORPORATION

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

FILED  
96 OCT 24 AM 11:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE I NAME

The name of the corporation shall be: A M Hinka, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

3914 St. Johns Avenue  
Atlantic Beach, Florida 32205

### ARTICLE III SHARES

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

100 Shares

### ARTICLE IV INITIAL REGISTERED AGENT & STREET ADDRESS:

The name and address of the initial registered agent is:

Anita M. Hinka  
3914 St. Johns Avenue  
Jacksonville, Florida 32205

**ARTICLE V INCORPORATOR(S)**  
See Instructions for officers/directors

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

Anita M. Hinko  
3914 St. Johns Avenue  
Jacksonville, Florida 32205

The undersigned Incorporator has executed these Articles of Incorporation this  
21<sup>st</sup> day of October, 1996.

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.501, FLORIDA STATUTES THAT,  
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: A M Hinka, Inc.
2. The name and address of the registered agent and office is:

Anita M. Hinka  
3914 St. Johns Avenue  
Jacksonville, Florida 32205

FILED  
96 OCT 24 AM 11:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

Anita M. Hinka  
(Signature)

10/21/96  
(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL. 32314