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TO: DIVISION OF CORPORATIONS

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FROM: AL CLARK

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072100000173

CONTACT: AL CLARK

PHONE: (813)398-6011

FAX #:

(813)397-5189

NAME: J.B.SHAD, INC.

AUDIT NUMBER..... H98000016485

DOC TYPE......FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS...0

PAGES..... 3

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SECRETARY OF STATE

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### ARTICLES OF INCORPORATION

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

#### ARTICLE I NAME

The name of the corporation shall be

J.B. Shad, Inc.



#### PRINCIPAL OFFICE ARTICLE II

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

5635 2nd Avenue No St. Petersburg, FL. 33710

#### ARTICLE III SHARES

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

### 1000 SHARES **NO PAR**

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

The name and address of the initial registered agent is:

prepared by:

Name: Jan Shad

Address 5635 2nd Avenue N. St. Petersburg, FL. 33710

PH# 727-789-7/05

Accounting & Tax Help, INC. 8668 PARK BLVD Suite .A SEMINOLE, Florida 33777

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FROM : ACCOUNTING & TAX HELP INC.

PHONE NO. : 8135287222 393 1766 Sep. 04 1998 08:26AM P3

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FROM : ACCOUNTING & TAX HELP INC.

PHONE NO. : 0135207222 393 1766 Sep. 01 1998 11:149M P9

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## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Jan Shad 5635 2nd Avenue N. St. Petersburg, FL, 33710

			cuted these Articles of Incorporation th
يک	day of	September	
(An	additional arti	cle must be added if an	afflective date is requested.)
,	/ ~ r	shad	
,	0	Signatur	Te .
	<del></del>	Signatur	<b>P</b>
		Signatur	

Notarization is not required

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

FROM: ACCOUNTING & TAX HELP INC.

1. The name of the corporation is:

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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

	J.B. Shad, Inc.	<del></del>
2.	The name and address of the registered agent and office is:	
	Accounting & Tax Help, INC. (Name)	98 SEP SECRET, TALLAHA
	8668 PARK BLVD. Suite A (P.O. Box not acceptable)	ARY OF SSEE,
	SEMINOLE, Florida 33777 (City/State/Zip)	AN II: OU

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.

Ol Clark	DATE	9-3-98
(Signature)		
PRESIDENT		

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

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