

J42045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

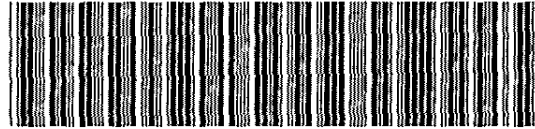
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400275601234

Filings prior to
1996

5 42045

ARTICLES OF INCORPORATION

FILED
1986 NOV 12 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OF
THE LINCOLN DONUT COMPANY, INC.

The undersigned subscriber to these Articles of incorporation, a natural person competent to contract, does hereby form a corporation for profit under the laws of the State of Florida.

ARTICLE I

NAME

EFFECTIVE DATE

11-5-86

The name of this corporation is The Lincoln Donut Company, Inc.

ARTICLE II

COMMENCEMENT OF CORPORATE EXISTENCE

The Corporation's existence shall commence on the date of execution and acknowledgment of these Articles of incorporation.

ARTICLE III

BUSINESS AND POWERS

A. The general nature of the business or businesses to be transacted by the Corporation is:

(1) to engage in the manufacture, production and distribution of all types of food products; to set up, franchise or operate food production and distribution facilities; and

(2) to engage in any activity or business permitted under the laws of the United States and the State of Florida.

B. The Corporation shall have power to do everything necessary, proper, advisable or convenient for the accomplishment of the purposes hereinbefore set forth, and to do all other things incidental thereto or connected therewith, which are not prohibited by statute or by these Articles of Incorporation.

ARTICLE IV

AUTHORIZED SHARES

The maximum number of shares of stock authorized to be issued by the Corporation is 7,500 shares of capital stock, all of which shares shall be common shares of the par value of \$1.00 per share and each of which shall have the same rights and privileges.

Each of the common shares shall entitle the holder thereof to one vote at any shareholders' meeting and otherwise to participate in all such meetings and in the assets of the Corporation. They shall be issued for such consideration as may be determined from time to time by the Board of Directors, provided that such consideration shall have a value at least equal to the full par value of such shares. The shares may be paid for in lawful money of the United States of America, or in property, labor or services.

ARTICLE V

PREEMPTIVE RIGHT

The shareholders shall have preemptive rights to acquire unissued or treasury shares of the Corporation or securities of the Corporation convertible into or carrying a right to subscribe to or acquire such shares of the Corporation.

ARTICLE VI

INITIAL REGISTERED OFFICE

The street address of the initial registered office of the Corporation is 215 Madison Street, Tampa, Florida 33602, and the name of the initial registered agent at that address is John C. Bierley.

ARTICLE VII

BOARD OF DIRECTORS

A. Initial Board of Directors. The name and address of the initial director of the Corporation is:

Ian Mackechnie
12310 North Nebraska Avenue
Tampa, Florida 33612

B. Number and Term. The Board of Directors shall be composed of not less than one (1) member who shall be elected at the annual meeting of shareholders to be held at the time and place prescribed in the By-Laws. The exact number of directors may be fixed by the By-Laws or by the shareholders. Directors need not be shareholders of the Corporation. They shall hold office after their election for a period of one year or until their successors are duly elected and qualified, subject to their resignation or their removal by the shareholders at any time with or without cause. The initial members of the Board of Directors, as named in this Article, shall hold office for the first year of existence of the Corporation or until their respective successors are duly elected and qualified.

C. Powers and Duties. Included among the powers and duties of the Board of Directors are the following:

- (1) electing the officers of the Corporation;
- (2) exercising complete charge of the business of the Corporation, including electing committees of the Board and delegating to them, as well as to the officers of the Corporation, such powers in the conduct of the Corporation's business as may be deemed advisable;
- (3) determining the compensation of the officers, including those who may also be directors; and
- (4) specifying the conditions upon which certificates representing shares of the Corporation shall be issued, and replacing lost or destroyed certificates by a new issue.

The foregoing notwithstanding, the powers and duties of the Board of Directors shall be limited as may be provided in the By-Laws or resolutions of the shareholders.

Except as otherwise required by the laws of the State of Florida, the powers and duties of the Board of Directors may be delegated to an Executive Committee.

ARTICLE VIII

OFFICERS

A. Officers of the Corporation shall consist of a President, Secretary and Treasurer, as well as such other officers as the Board of Directors may deem advisable.

B. Officers need not be shareholders of the Corporation.

C. All officers shall have rank, tenure of office, powers, and duties as may be prescribed by the By-Laws or the Directors by appropriate resolution.

D. The names and office of each of the first officers each of whom shall hold office for the first year of the Corporation's existence or until their respective successors are duly elected and qualified, are:

Ian Mackechnie - President

John C. Bierley - Secretary

ARTICLE IX

INCORPORATOR

The name and street address of the person signing these Articles is:

Ian Mackechnie
12310 North Nebraska Avenue
Tampa, Flor. 33612

ARTICLE X

INDEMNIFICATION

A. Any person who was or is a party or is threatened to be made a party to any threatened, pending or completed action, suit or proceeding, whether civil, criminal, administrative or investigative (including by or in the right of the Corporation) by reason of the fact that he is or was a director, officer, employee or agent of the Corporation, or is or was serving at the request of the Corporation as a director, officer, employee or agent of another corporation, partnership, joint venture, trust or other enterprise, shall be indemnified by the Corporation against expenses (including reasonable attorney's fees), judgments, fines and amounts paid in settlement actually and reasonably incurred by him in connection with such action, suit or proceeding if he acted in good faith in a manner he reasonably believed to be in or not opposed to the best interest of the Corporation, and with respect to any criminal action or proceeding, had no reasonable cause to believe his conduct was unlawful, to the maximum extent permitted by and in the manner provided by the laws of the State of Florida.

B. The Corporation shall not, however, indemnify any director, officer or employee with respect to matters as to which he shall be finally adjudged in any such action, suit or proceeding to be liable for negligence or misconduct in the performance of his duty to the Corporation as such director, officer or employee, or to be guilty of fraud or material misrepresentation to the Corporation, its Board of Directors, its shareholders, or to any other person, nor in respect of any matter on which any settlement or compromise is effected, where the settlement or compromise shall have substantially exceeded the expense which might have reasonably been incurred by such director, officer or employee in conducting such litigation to its final conclusion. The right of indemnification granted by this Article shall not be conclusive of other rights to which any director, officer or employee may be entitled as a matter of law. Furthermore, additional rights of indemnification may be provided in the By-Laws.

ARTICLE XI

MISCELLANEOUS

A. Other Offices, Agencies and Branches

The Corporation may have other offices, agencies and branches at such places either within or without the State of Florida as may be determined by the Board of Directors.

B. Location of Shareholders and Directors Meetings

Meetings of the shareholders and directors of the Corporation may be held at places within or without the State of Florida, and the place or places for the holding of such meetings may be specified in the By-Laws or by the Board of Directors.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 5th day of November, 1986.


Ian Mackechnie

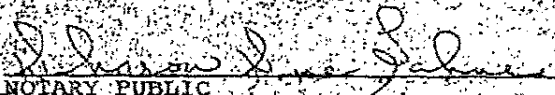
STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

I HEREBY CERTIFY that before me, the undersigned authority, this day personally appeared Ian Mackechnie, to me known and

known to me to be the person described in and who signed the foregoing Articles of Incorporation, and who acknowledged before me that he executed the same freely and voluntarily for the uses and purposes herein expressed.

WITNESS my hand and official seal at Tampa, Florida, this 27 day of November, 1986.


NOTARY PUBLIC
State of Florida at Large
My Commission Expires:

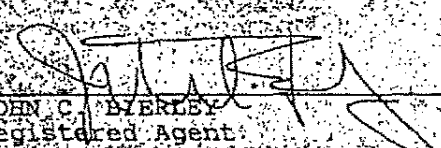
Notary Public State of Florida at Large
My Commission Expires May 11, 1988

ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

FILED

1936 NOV 12 14 9 47

The undersigned, having been designated as Registered Agent of The Lincoln Donut Company, Inc. in its Articles of Incorporation, hereby accepts such designation and agrees to comply with the provisions of F.S. §48 091, relating to keeping the corporation's registered office open.


JOHN C. BIERLEY
Registered Agent

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT
1987



FLORIDA DEPARTMENT OF STATE
George F. Malone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Cover Before Making Entries
Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

042045
THE LINCOLN DONUT COMPANY, INC.
JOHN C. BIERLEY
215 MADISON STREET
TAMPA, FL 33602

2. Enter Change of Address - If Corporation Principal Office P.O. Box Number Alone is NOT Sufficient

Street Address 2*

P.O. Box No. 22

City and State 21

Zip Code 24

* If above address is a correction, enter the correct address in item 3, including Zip Code

3. Date Incorporated or Changed To Do Business in Florida 11/05/1986

4. Federal Employer Identification No. (EIN)

5. Date of Last Filing

6. Names and Street Addresses of Each Officer and Director as of December 31, 1986

Names of Officers and Directors	Title	Street Address of Each Officer and Director	City and State
IAN MACKECHNIE	D/P	12310 NO. NEBRASKA AVE.	TAMPA, FL
JOHN C. BIERLEY	S	215 MADISON ST.	TAMPA, FL

REGISTERED AGENT INFORMATION

7. Name and Street Address of Current Registered Agent

BIERLEY, JOHN C.
215 MADISON ST.
TAMPA, FL 33602

Name of Registered Agent

Street Address (Do NOT Use P.O. Box Number)

Street Address (Do NOT Use P.O. Box Number)

City and State FL Zip Code 33602

9. I, the undersigned, in compliance of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, submits this statement to the Department of State for filing and recording. Such change was authorized by resolution duly adopted by the board of directors on

Exhibit Agent's Appointment of Registered Agent Form filed on and accept the obligations of Section 607.035 F.S.

SIGNATURE _____ DATE _____
Registered Agent Accepts Appointment

\$25.00 additional fee required for Registered Agent changes.

10. See signature instructions on back of this form.

I, _____, President or Director of the Corporation, do hereby certify that the information furnished in this report is true and correct to the best of my knowledge and belief, and I am not aware of any untrue or misleading information contained herein.

Signature _____ Date March 20, 1987

Typed Name of Signing Officer _____ Title President Director Telephone Number 813-971-7214

11. Should you desire a copy of this report, call the Department of State at (813) 971-7214. ☐ YES ☐ NO

CERTIFICATE OF STATE DESIGNED ☐ AS ADDITIONAL FOR FILING FOR A CONTINUED 1/1/87

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST, AND

APPROVED

CORPORATION
ANNUAL REPORT
1988



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

APR - 5 1989 10:47

Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office: 042045 THE LINCOLN DONUT COMPANY, INC. 1 JOHN C. BIERLEY 215 MADISON STREET TAMPA, FL 33602 If above address is incorrect in any way enter the correct address in item 2. Include Zip Code.		2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient Street Address 21 P.O. Box No. 22 City and State 23 Zip Code 24	
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3. Date Incorporated or Qualified To Do Business in Florida: 11/05/1986	4. Federal Employer Identification Number (FEIN): 54-274 2276	5. Date of Last Report: 03/31/1987
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6. Names and Street Addresses of Each Officer and Director, as of December 31, 1987

1. Names of Officers and Directors	2. Title	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State
1. IAN MACKECHNIE	D/P	12310 NO. NEBRASKA AVE.	TAMPA, FL
2. JOHN C. BIERLEY	S	215 MADISON ST.	TAMPA, FL

7. Name and Address of Current Registered Agent BIERLEY, JOHN C. 215 MADISON ST. TAMPA, FL 33602		8. Name and Address of New Registered Agent Name 81 Street Address 1 (Do NOT Use P.O. Box Number) 82 Street Address 2 (Do NOT Use P.O. Box Number) 83 City and State 84 Zip Code 85	
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9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. If a foreign corporation, date first transacted business in Florida: _____

11. See signature instructions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath, (Officer or Director signing must be listed in Block 6)

Signature: <u>Ian Mackechnie</u>	Date: <u>3/30/88</u>
Typed Name of Signing Officer or Director: <u>IAN MACKECHNIE</u>	Telephone Number: <u>971-7214</u>

12. Should you desire a certificate of status check the box: ☐ CERTIFICATE OF STATUS DESIRED

\$4 Additional Fee retained for a Certificate of Status

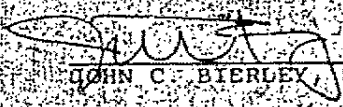
ARTICLES OF AMENDMENT

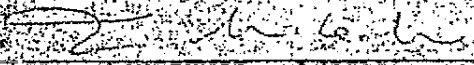
TO CHANGE NAME OF THE LINCOLN DONUT COMPANY, INC. TO
THE LINCOLN BAKING CORPORATION

By Certificate of Resolution dated April 22, 1988, the Shareholder and Director of The Lincoln Donut Company, Inc. amends the Articles of Incorporation of said corporation as follows:

- (1) The name of The Lincoln Donut Company, Inc. is changed to The Lincoln Baking Corporation.
- (2) The references to The Lincoln Donut Company, Inc. in the Articles of Incorporation are amended to read "The Lincoln Baking Corporation."

IN WITNESS WHEREOF, we have hereunto set our hand and seal this 27th day of April, 1988.


JOHN C. BIERLEY, SECRETARY

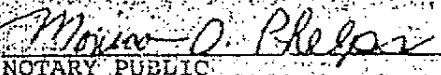

IAN MACKECHNIE, PRESIDENT, SOLE
SHAREHOLDER AND DIRECTOR

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

I HEREBY CERTIFY that before me the undersigned authority, this day personally appeared IAN MACKECHNIE and JOHN C. BIERLEY, to me known and known to me to be the persons described in and who signed the foregoing Articles of Amendment, and who acknowledged before me that they executed the same freely and voluntarily for the use and purposes herein expressed.

WITNESS my hand and official seal at Tampa, Florida, this 27th day of April, 1988.


NOTARY PUBLIC

My Commission Expires:

NOTARY PUBLIC, State of Florida
My Commission Expires July 31, 1990

FILED

89 OCT 25 AM 11:57

ARTICLES OF AMENDMENT
TO CHANGE NAME OF THE LINCOLN BAKING CORPORATION TO
AMSCOT CORPORATION
TALLAHASSEE, FLORIDA

By Certificate of Resolution dated October 17th, 1988, the Shareholder and Director of The Lincoln Baking Corporation amends the Articles of Incorporation of said corporation as follows:

- (1) The name of The Lincoln Baking Corporation is changed to Amscot Corporation.
- (2) The references to The Lincoln Baking Corporation in the Articles of Incorporation are amended to read "Amscot Corporation."

IN WITNESS WHEREOF, we have hereunto set our hand and seal this ___ day of October, 1988.


JOHN C. BIERLEY, SECRETARY

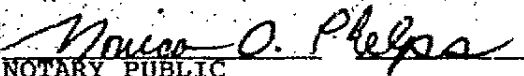

IAN MACKECHNIE, PRESIDENT,
SOLE SHAREHOLDER AND
DIRECTOR

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

I HEREBY CERTIFY that before me the undersigned authority, this day personally appeared IAN MACKECHNIE and JOHN C. BIERLEY, to me known and known to me to be the persons described in and who signed the foregoing Articles of Amendment, and who acknowledged before me that they executed the same freely and voluntarily for the use and purposes herein expressed.

WITNESS my hand and official seal at Tampa, Florida, this 17th day of October, 1988.


NOTARY PUBLIC

NOTARY PUBLIC, State of Florida
My Commission Expires: My Commission Expires July 30, 1990

CERTIFICATE OF SPECIAL MEETING
OF SHAREHOLDERS & DIRECTORS OF THE
LINCOLN BAKING CORPORATION

Having waived notices of a special meeting of The Lincoln Baking Corporation, Ian Mackechnie, the sole shareholder and Director of the Corporation amends the Articles of Incorporation by adopting the following resolution:

RESOLVED,

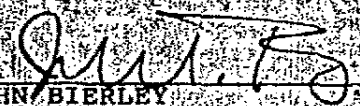
that the name of The Lincoln Baking Corporation be changed to Amscot Corporation.

FURTHER RESOLVED,

that all references to The Lincoln Baking Corporation in the Articles of Incorporation be substituted with "Amscot Corporation."


IAN MACKECHNIE
President, Sole Shareholder
and Director

Date: 10/17/88


JOHN BIERLEY
Secretary

Date: 10/17/88

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION
ANNUAL REPORT
1989



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

ADVISED
AND
FILED

MAR 27 AM 9:43

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entry
Filing Fee of \$35 Required - Make Checks Payable to: Secretary of State

1. Name and Address of Corporation Principal Office:

ZIP + 4

342045
AMSCOT CORPORATION
JOHN C. BIERLEY
215 MADISON STREET
TAMPA, FL 33602-4703

If address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

118 SOUTH WESTSHORE BLVD.

P.O. Box No. 22

PO BOX 31073 SUITE 207

City and State 23

TAMPA FL

Zip Code 24

33631-3073

3. Date Incorporated or Qualified To Do Business:

11/05/1986

4. Federal Employer Identification Number (FEIN)

59-2742276

5. Date of Last Report

04/05/1988

6. Names and Sns. Addresses of Each Officer and Director, as of December 31, 1988

1. Title	2. Name of Officers and Directors	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State	5.
D/P	IAN MACKECHECHIE	12310 NO. NEBRASKA AVE. 118 S. WESTSHORE BLVD.	TAMPA, FL	
S	JOHN C. BIERLEY	215 MADISON ST.	TAMPA, FL	

REGISTERED AGENT INFORMATION

7. Name and Address of new Registered Agent

Name 81

Street Address 1 (Do NOT Use PO Box Number) 82

Street Address 2 (Do NOT Use PO Box Number) 83

City and State 84

Zip Code 85

FL

BIERLEY, JOHN C.
215 MADISON ST.
TAMPA, FL 33602

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on 15 NOV 1988

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

10. If a foreign corporation, date first transacted business in Florida

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath (Officer or Director Signing must be listed in Block 6)

Signature
IAN MACKECHECHIE

Title

PRESIDENT

Date

3/21/89

Telephone Number

813-286-1129

12. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED



\$5 Additional Fee
Required for a
Certificate of Status

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

PS036/301

CORPORATION
ANNUAL REPORT
1990



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1990 MAR 12 AM 11:05

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

Filing Fee of \$35 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

J42045 1
ZIP + 4 PRESORT

AMSCOT CORPORATION
110 60. WESTSHORE BLVD., SUITE 207
P.O. BOX 31073
TAMPA, FL 33631-3073

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21
4808 E. BROADWAY
P.O. Box No. 22
City and State 23
TAMPA, FLORIDA
Zip Code 24
33605.

3. Date Incorporated or Qualified To Do Business in Florida 11/05/1986

4. FEI Number 59-2742276

☐ FEI Number Applied For
☐ FEI Number Not Applicable

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information)

1. Title	2. Names of Officers and Directors	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State
D/P	IAN MACKECHNIE	110 S. WESTSHORE BLVD. 4808 E. BROADWAY	TAMPA, FL
S	JOHN C. BIERLEY	215 MADISON ST.	TAMPA, FL

REGISTERED AGENT INFORMATION

8. Name and Address of New Registered Agent

7. Name and Address of Current Registered Agent

BIERLEY, JOHN C.
215 MADISON ST.
TAMPA, FL 33602

Name 81
Street Address 1 (Do NOT Use P.O. Box Number) 82
Street Address 2 (Do NOT Use P.O. Box Number) 83
City and State 84 FL Zip Code 85

9. Pursuant to the provisions of Sections 607.004 and 607.007, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of Section 607.325 FS.
SIGNATURE _____ DATE 3/5/90
(Registered Agent Accepting Appointment)

10. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am an officer or director of the corporation or the owner or trustee empowered to execute this report as required by Chapter 607, F.S.

Signature _____ Date 3/5/90
Typed Name of Signing Officer or Director IAN MACKECHNIE Title PRESIDENT Filing Fee Number 813-748-4222

11. Should you desire a certificate of status check the box
CERTIFICATE OF STATUS DESIRED. ☐
\$5 Additional Fee required for Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.

CORPORATION
ANNUAL REPORT
1991



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FEB 11 1991

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED

Read Instructions on Other Side Before Making Entries
FILING FEE OF \$61.25 REQUIRED

1. Name and Mailing Address of Corporation: **DOCUMENT # J42045 (1)**
ZIP + 4 PRESORT

AMSCOT CORPORATION
4808 E. BROADWAY
TAMPA, FL 33605-4704

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

DO NOT WRITE IN THIS SPACE

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address
1502 E. FLETCHER AVE
22 P.O. Box No.
23 City and State
TAMPA
24 Zip Code
FLORIDA 33612

3. Date Incorporated or Qualified
To Do Business in Florida
11/05/1986

4. FEI Number
59-2742276

FEI Number Applied For

5. **\$8.75 Additional Fee required**
For a Certificate of Status

FEI Number Not Applicable

CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1 D/P	IAN MACKECHNIE	4808 E. BROADWAY	TAMPA, FL
2 S	JOHN C. BIERLEY	215 MADISON ST.	TAMPA, FL
3			
4			
5			
6			

REGISTERED AGENT INFORMATION

8. Name and Address of New Registered Agent

7. Name and Address of Current Registered Agent

BIERLEY, JOHN C.
215 MADISON ST.
TAMPA, FL 33602

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Numbers)

83 Street Address 2 (Do NOT Use P.O. Box Numbers)

84 City

FL

85 Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors.

I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0503, Florida Statutes.

SIGNATURE _____
(Registered Agent Accepting Appointment)

DATE _____

10. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect made under oath. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 6 or on an attachment with an address.

SIGNATURE _____

Typed Name of Signing Officer or Director

IAN MACKECHNIE

Title

PRESIDENT

Telephone Number (Daytime)

813 1971-0899

FILING FEE OF \$61.25 REQUIRED - Make Checks Payable To: Secretary of State **\$8.75 Additional Fee required for a Certificate of Status**

FILED

PM JUN 10 1991

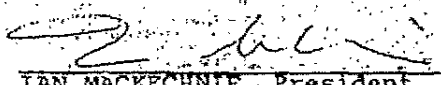
SECRETARY OF STATE
TALLAHASSEE, FLA

ARTICLES OF AMENDMENT
TO CHANGE NAME OF AMSCOT CORPORATION
TO AMSCOT HOLDINGS, INC.

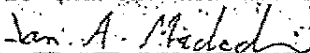
By Certificate of Resolution dated May 29, 1991, the Shareholder and Directors of Amscot Corporation amended the Articles of Incorporation of said corporation to state as follows:

- (1) That the name of Amscot Corporation be changed to Amscot Holdings, Inc.
- (2) That all references to the words "Amscot Corporation" in the Articles of Incorporation be substituted with the words "Amscot Holdings, Inc."

IN WITNESS WHEREOF, we have hereunto set our hands and seal this 29th day of May, 1991.


IAN MACKECHNIE, President,
Sole Shareholder and Director

Date: May 29, 1991


IAN ANDREW MACKECHNIE, Director

Date: May 29, 1991

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

I HEREBY CERTIFY that before me the undersigned authority, this day personally appeared IAN MACKECHNIE and IAN ANDREW MACKECHNIE, to me known and known to me to be the persons described in and who signed the foregoing Articles of Amendment, and who acknowledged before me that they executed the same freely and voluntarily for the use and purpose herein expressed.

WITNESS my hand and official seal at Tampa, Florida, this 29th day of May, 1991.


NOTARY PUBLIC NOTARY PUBLIC, State of Florida
My Commission Expires July 30, 1994

CERTIFICATE OF SPECIAL MEETING
OF SHAREHOLDER & DIRECTORS OF
AMSCOT CORPORATION

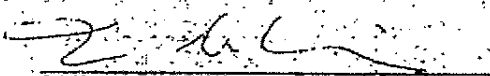
Having waived notice of special meeting of Amscot Corporation, Ian Mackechnie, sole Shareholder and Director of the Corporation, amends the Articles of Incorporation by adopting the following resolution:

RESOLVED,

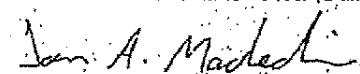
That the name of Amscot Corporation be changed to Amscot Holdings, Inc.

FURTHER RESOLVED,

That all references to the words "Amscot Corporation" in the Articles of Incorporation be substituted with the words "Amscot Holdings, Inc."


IAN MACKECHNIE, President,
Sole Shareholder and Director

Date: May 29, 1991


IAN ANDREW MACKECHNIE
Director

Date: May 29, 1991

**FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST**

CORPORATION
ANNUAL REPORT
1992



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

MIZ092

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

Read Instructions on Other Side Before Making Entry
FILING FEE \$61.25 Make Payable To: Secretary of State

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation: **DOCUMENT #J42045 (1)**

**AMSCOT HOLDINGS, INC.
1502 E FLETCHER AVE
TAMPA FL 33612-3762**

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21. Mailing Address

22. P.O. Box No.

23. City and State

24. Zip Code

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2

3. Date incorporated or Continued To Do Business in Florida **11/05/1986**

3a. Date of Last Report **02/11/1991** 4. Filer Number **59-2742276** Filer Number Assigned For **\$8.75** (Additional Fee Required for Certificate of Status) Filer Number Not Applicable **CERTIFICATE OF STATUS DESIRED**

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1	2	3	4
Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1x	D/P	IAN MACKECHNIE	4808 E. BROADWAY TAMPA, FL
2x	S	JOHN C. BIERLEY	215 MADISON ST. TAMPA, FL
3x		1502 E. FLETCHER	TAMPA, FL
4x			
5x			
6x			

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent	8. Name and Address of State-Registered Agent
BIERLEY, JOHN C. 215 MADISON ST. TAMPA, FL 33602	
	81. Name
	82. Street Address (Do NOT Use P.O. Box Number)
	83. City and State (Do NOT Use P.O. Box Number)
	84. Zip

9. Pursuant to the provisions of Sections 607.02(2) and 607.1508 of the Florida Statutes, I, the undersigned, do hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and I am a duly qualified and authorized officer or director of the corporation.

SIGNATURE *[Signature]* 2/19/92

10. This corporation has liability for filing this report under S. 190.02, Florida Statutes. ☒ Yes ☐ No

11. I certify that the information furnished herein is true and correct to the best of my knowledge and belief, and I am a duly qualified and authorized officer or director of the corporation.

SIGNATURE *[Signature]* 2/17/92
IAN MACKECHNIE PRESIDENT 813-971-0899

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional \$5.00 to the filing fee.

File Now. Filing Fee after May 1 is \$225.00

APPROVED
AND
FILED

93 MAY -1 AM 8:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1993



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1. Name and Mailing Address of Corporation: **DOCUMENT # J42045 (1)**
AMSCOT HOLDINGS, INC.
1502 E FLETCHER AVE
TAMPA FL 33612-3782

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/05/1986	3a. Date of Last Report 03/20/1992
4. FEI Number 592742276	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonqualifier with IRS 501(c)(3) Tax Exempt Status ☐	\$138.75 Supplemental Fee Not Required
8. This corporation has liability for... Florida Statutes ☐ Yes ☒ No	

If above mailing address is incorrect in any way, the filer must indicate correction and enter correction in Block 2

FILING FEE \$200.00	ANNUAL REPORT \$61.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE MAKE CHECK PAYABLE TO DEPARTMENT OF STATE
2. Mailing Address	2a. Principle Place of Business
21 State, Apt. #, etc.	26 State, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24 Country	29 Country

9. Name and Address of Current Registered Agent
BIERLEY, JOHN C.
215 MADISON ST.
TAMPA FL 33602

81 Name	82 Street Address (P.O. Box Number is not Acceptable)	83 City	84 State	85 Country
			FL	

11. Pursuant to the provisions of Sections 607.0802 and 607.1508 or Sections 607.0102 and 607.1509, Florida Statutes, the above named corporation, submit this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change has been made by the corporation on 03/20/1992. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0802, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS				13. OFFICERS AND DIRECTORS (Continued)			
1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP	1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP
	D/P	TAN MACKECHIE	1502 E FLETCHER TAMPA FL				
1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP	1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP
	S	JOHN C. BIERLEY	215 MADISON ST. TAMPA FL				
1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP	1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP
1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP	1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP
1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP	1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP
1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP	1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP
1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP	1. TITLE	2. NAME	3. ADDRESS	4. CITY, ST, ZIP

14. I certify that the information disclosed on this annual report or supplemental annual report is true, and that I am the duly authorized officer or director of the corporation, and that I am familiar with and accept the obligations of Section 607.0802, Florida Statutes, and that I am familiar with and accept the obligations of Section 607.0102, Florida Statutes.

SIGNATURE TAN MACKECHIE DATE 2/15/93
 Title PRESIDENT Office 831971-0879

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994
AMOUNT DUE ON OR BEFORE 01/01/94: \$220 IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375

CORPORATION
ANNUAL REPORT
1994



FLORIDA DEPARTMENT OF STATE
 John Smith
 Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J42045 (1)

1. Corporation Name
AMSCOT HOLDINGS, INC.

2. Mailing Address
1502 E FLETCHER AVE
TAMPA, FL 33612

Principal Place of Business
1502 E FLETCHER AVE
TAMPA FL 33612

If above addresses are incorrect in any way, file through incorrect information and enter correction below.

2. Mailing Address **2a. Principal Place of Business**
21 8430 N. ARMENIA AVE **20 8430 N. ARMENIA AVE**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

22 **27**
City & State **City & State**
TAMPA FLORIDA **TAMPA**

23 **28**
County **County**
33604 U.S.A. **33604 U.S.A.**

24 **29** **30**
Name and Address of Current Registered Agent **Name and Address of New Registered Agent**

BIERLEY, JOHN C.
215 MADISON ST.
TAMPA FL 33602

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **85 Zip Code**
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.0503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or principal place of business, in the State of Florida. Such changes was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in accordance with, and accept the obligations of, Section 607.0505 or 617.0503, Florida Statutes.

SIGNATURE **OFFICIAL SEAL OR PRINTED NAME OF SECRETARY OF STATE** **DATE**

12. OFFICERS AND DIRECTORS				13. CHANGES TO OFFICERS AND DIRECTORS			
11 TITLE	D/P	11 NAME		11 TITLE		11 NAME	
12 NAME	IAN MALKECHINE	12 NAME		12 NAME		12 NAME	
13 STREET ADDRESS	1502 E FLETCHER	13 STREET ADDRESS		13 STREET ADDRESS		13 STREET ADDRESS	
14 CITY-ST-ZIP	TAMPA FL	14 CITY-ST-ZIP		14 CITY-ST-ZIP		14 CITY-ST-ZIP	
21 TITLE	S	21 TITLE		21 TITLE		21 TITLE	
22 NAME	JOHN C. BIERLEY	22 NAME		22 NAME		22 NAME	
23 STREET ADDRESS	215 MADISON ST.	23 STREET ADDRESS		23 STREET ADDRESS		23 STREET ADDRESS	
24 CITY-ST-ZIP	TAMPA FL	24 CITY-ST-ZIP		24 CITY-ST-ZIP		24 CITY-ST-ZIP	
31 TITLE		31 TITLE		31 TITLE		31 TITLE	
32 NAME		32 NAME		32 NAME		32 NAME	
33 STREET ADDRESS		33 STREET ADDRESS		33 STREET ADDRESS		33 STREET ADDRESS	
34 CITY-ST-ZIP		34 CITY-ST-ZIP		34 CITY-ST-ZIP		34 CITY-ST-ZIP	
41 TITLE		41 TITLE		41 TITLE		41 TITLE	
42 NAME		42 NAME		42 NAME		42 NAME	
43 STREET ADDRESS		43 STREET ADDRESS		43 STREET ADDRESS		43 STREET ADDRESS	
44 CITY-ST-ZIP		44 CITY-ST-ZIP		44 CITY-ST-ZIP		44 CITY-ST-ZIP	
51 TITLE		51 TITLE		51 TITLE		51 TITLE	
52 NAME		52 NAME		52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS		53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY-ST-ZIP		54 CITY-ST-ZIP		54 CITY-ST-ZIP		54 CITY-ST-ZIP	
61 TITLE		61 TITLE		61 TITLE		61 TITLE	
62 NAME		62 NAME		62 NAME		62 NAME	
63 STREET ADDRESS		63 STREET ADDRESS		63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY-ST-ZIP		64 CITY-ST-ZIP		64 CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information furnished on this form is true and correct. I am not aware of any information which would cause this corporation to be ineligible for incorporation in Florida. I further certify that I am an officer or director of the corporation or the individual or trustee empowered to execute this report as required by Chapter 617, Laws of Florida, and that my name appears in Block 12 or Block 13 - changed or on an attachment with an address.

SIGNATURE: *[Signature]* **6/10/94** **813**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **753-8393**
PRESIDENT

APPROVED AND FILED

94 JUN 14 AM 6:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **3a. Date of Last Report**
11/05/1996 **05/01/1997**
4. FEI Number **Applied For**
59-2742276 **(Tax Applicable)**
5. Certificate of Status Desired **6. Election to Report**
\$8.75 Additional Fee Required **Financing First**
7. Nonprofit with IRS 501(c)(3) **First Contribution**
Tax Exempt Status **\$5.00 May Be**
Added to Fees
8. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes **Yes** **No**

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 *LS*

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mayhew
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

55 MAY 19 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J42045 (1)

1. Corporation Name

AMSCOT HOLDINGS, INC.

Principal Place of Business

8430 N. ARDENIA AVENUE
TAMPA FL 33604
US

Using Address

8430 N. ARDENIA AVENUE
TAMPA FL 33604
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/05/1988

34. Date of Last Report

09/14/1994

4. FID Number

59-2742276

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has taken, for filing the tax under S. 120.032,
Florida Statute ☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

State, Fed. #, etc.

22

State, Fed. #, etc.

27

City & State

23

City & State

28

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**BIERLEY, JOHN C.
215 MADISON ST.
TAMPA FL 33602**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, Florida Statutes, the above named corporation certifies this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am authorized to accept the provisions of Section 607.0505, Florida Statute.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	IAN MACKECHNIE
STREET ADDRESS	1502 E FLETCHER
CITY-STATE-ZIP	TAMPA FL
TITLE	S
NAME	JOHN C. BIERLEY
STREET ADDRESS	215 MADISON ST.
CITY-STATE-ZIP	TAMPA FL
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
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NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

14 TITLE	☐ Chair ☐ Assn
15 NAME	
16 STREET ADDRESS	
17 CITY-STATE-ZIP	
18 TITLE	☐ Chair ☐ Assn
19 NAME	
20 STREET ADDRESS	
21 CITY-STATE-ZIP	
22 TITLE	☐ Chair ☐ Assn
23 NAME	
24 STREET ADDRESS	
25 CITY-STATE-ZIP	
26 TITLE	☐ Chair ☐ Assn
27 NAME	
28 STREET ADDRESS	
29 CITY-STATE-ZIP	
30 TITLE	☐ Chair ☐ Assn
31 NAME	
32 STREET ADDRESS	
33 CITY-STATE-ZIP	

14. I, the undersigned, certify that the information provided with this filing is true and correct to the best of my knowledge and belief, and that I am authorized to execute this statement on behalf of the corporation. I am authorized to execute this statement on behalf of the corporation. I am authorized to execute this statement on behalf of the corporation.

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

IAN MACKECHNIE

5/12/95 813-933-8393