# P0000000033/3

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•	
Secretary of State Division of Corporations P. O. Box 6327 Talahassee, FL 32314	OO JA
Re: Second Chance Di	771.3
(name of co	orporation)
San of	resident in the second of the
•	Ëo. N
•	프스트 프로그 프로그
Gentlemen:	icles of Incorporation, together with my check in the
Gentlemen:  Enclosed please find the original and one copy of Aramount of \$78.75.	neies of meorpotation, and
	ied Copy of Articles of Incorporation and Fee for
This represents the cost of the Plang Peos, extended Registered Agent Designation for the above name	ed corporation.
Registered Agent 2008	Very truly yours,
<b>&gt;</b>	300030891136 -01/05/0001069010 *****78.75 *****78.75  ///////////////////////////////////
	(name of corporation)
Soci	nd Chance Distributors, Inc.
Seco	
[	MAILING ADDRESS OF CORPORATION
	1457 Bay Grove Drive
	Port Orange, Fl 32119  PHONE
•	(904) 760 8954 Area Code Number Ext.

### ARTICLES OF INCORPORATION

Second Chance Distributors, Inc. (name of corporation) The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida. ARTICLE I - CORPORATE NAME The name of the corporation is: Second Chance Distributors, Inc. ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law. ARTICLE III - PURPOSE The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida. ARTICLE IV - CAPITAL STOCK The corporation is authorized to issue one hundred shares ( 100 ) of \$1.00 \_\_\_\_) par value Common Stock, which shall be designated "Common Shares." Dollar(s) (\$ 1.00 ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT The principal office, if known, or the mailing adress of the corporation is: Second Chance Distributors, NAMP. 1457 Bay Grove Drive ADDRESS ZIP 32119 AGINO.FJ Port Orange The name and street address of the Initial Registered Agent of this Corporation is: CITY Joan Hamilton NAME 2625 N.E. 6th Avenue ADDRESS ZIP 33334 PLORIDA\_ Wilton Manors CTIY ARTICLE VI - INITIAL BOARD OF DIRECTORS \_) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows: Jeff Vickers NAME 1457 Bay Grove Dr ADDRESS STATE Florida Port Orange CITY Cindy Vickers NAME ADDRESS 1457 Bay Grove Dr ZIP 32119 STATE Florida Port Orange. CITY NAME ADDRESS 7.JP STATE

CITY

SEMINOLE-MIAMI

#### ARTICLE VII - INCORPORATORS

the nam	es and addresses of the incorporators	signing these Afficies of	mentionam are as	INIONA.
NAME	Jeff Vickers			
ADDRESS	1457 Bay Crove Drive			
CTIY	Port Orange	STATE	Florida	7JP 32119
NAME	Cindy Vickers		-	. ÷
ADDRESS	1457 Bay Grove Drive	-		
TIY	Port Orange	SIATE	Florida	<b>ZIP</b> 32119
NAME				
ADDRESS				
:TY		SIMITE		ZIP
day of	December 19 99	X Aeff 1/2 Tondy	illers Vicken	(Scal) (Scal)
COUNTY before me,	F FLORIDA ) SS OF Broward) a Notary Public authorized to take ack	tnowledgements in the Sta	te and County set for	th above, personally
appeared	T-55 *** -1	Cindu Wielene		
	Jeii Vickers &	Cindy Vickers		
acknowledg	me and known to be the person(s) ged before me thatthey exec	uted these Articles of Inc	corporation.	
day of		(Notary Public, State of Florida	the	aid, this <u>4th</u>

## CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

**OF** 

Second Chance Distributors, Inc.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at	2625 N.E. 6th Avenue		) }	. · -
	Wilton Manors, Fl 33334		<b>z</b> z	7
has named	Joan Hamilton	333 1 ut	P	ָ ר
located at the aforesaid address, as its Registered Agent to accept service of proces			$\vec{5}$	
within this	state.	RIE.		

#### ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)