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Huggins & Othen Tire Service

408 West 8th Street
Jacksonville, Florida 32206

City/State/Zip

Phone #

Office Use Only

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

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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2000 MAR 27 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

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Examiner's Initials

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
PAMPERED PROFESSIONALS, INC.

The undersigned, acting as incorporator under the provisions of the laws of the State of Florida, hereby adopts the following Articles of Incorporation:

ARTICLE I. NAME

The name of this corporation is: Pampered Professionals, Inc.

ARTICLE II. NATURE OF BUSINESS

This corporation is being organized for the transaction of any and all lawful business permitted under the Florida Business Corporation Act and the laws for the United States.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of capital stock that the corporation is authorized to issue is One Thousand (1000) shares with a par value of ONE DOLLAR (\$1.00) each. All of the shares are of one class only.

ARTICLE IV. TERM OF EXISTENCE

The corporation is to exist perpetually.

ARTICLE V. ADDRESS

The initial address of the principal office of this corporation is: 3901 Grand Central Place West, Jacksonville, FL 32246. The Board of Directors may from time to time move the principal office to any other address in Florida.

ARTICLE VI. DIRECTORS

This corporation shall have two directors initially. The number of directors may be increased or diminished from time to time by by-laws adopted by the stockholders, but shall never be less than one (1).

ARTICLE VII. INITIAL DIRECTORS

The name and post office address of the initial directors, who shall hold office for the first year of corporate existence or until their successors are elected or appointed and have qualified is:

<u>DIRECTOR</u>	<u>ADDRESS</u>
TINA WILKINSON	3901 Grand Central Place W. Jacksonville, FL 32246
DEBRA J. ARIAIL	3901 Grand Central Place W. Jacksonville, FL 32246

ARTICLE VIII. INCORPORATOR

The name and post office address of the incorporator of this corporation is: TINA WILKINSON, 3901 Grand Central Place West, Jacksonville, FL 32246

ARTICLE IX. OFFICERS

The names and post office address of the officers who shall hold office for the first year of corporate existence or until their successors are elected or appointed are:

<u>NAME</u>	<u>OFFICE</u>	<u>ADDRESS</u>
TINA WILKINSON	President/Treasurer	3901 Grand Central Place W. Jacksonville, FL 32246
DEBRA J. ARIAIL	Vice President/Secretary	3901 Grand Central Place W. Jacksonville, FL 32246

ARTICLE X. REGISTERED AGENT

The name and post office address of the registered agent of this corporation is: TINA WILKINSON 3901 Grand Central Place West, Jacksonville, FL 32246.

ARTICLE XI. AMENDMENTS

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders, and approved at a stockholders' meeting by a majority of the issued and outstanding stock entitled to vote thereon, unless all the Directors and all the stockholders sign a written statement manifesting their intention that a certain amendment to these Articles of Incorporation be made. Each and every action to be voted upon and thereby approved by the stockholders.

EXECUTED this 17th day of February 2000.

Tina Wilkinson
TINA WILKINSON, President


STATE OF FLORIDA

COUNTY OF DUVAL

The foregoing instrument was acknowledged before me this 17th day of February 1992 by TINA WILKINSON, who is personally known to me or who presented N/A as identification and who did take an oath.

NAME: Elizabeth Stanton Newsteder
Notary Public, State of Florida

My Commission Expires:

 Elizabeth Stanton Newsteder
★ My Commission CC718504
Expires February 22, 2002

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATION OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, 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: Pampered Professionals, Inc.
2. The name and address of the registered agent is:

TINA WILKINSON
3901 Grand Central Place West
Jacksonville, FL 32246

Signature



Title PRESIDENT

Date



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



Registered Agent Filing Fee: \$35.00