20003719

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H00000016625 6)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name : CORPORATE & CRIMINAL RESEARCH SERVICES

Account Number : 110450000714

Phone : (850)222-1173

Fax Number : (850)224-1640

FLORIDA PROFIT CORPORATION OR P.A.

SALLIE KLINK'S BIRD HAVEN INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

H000000166256

ARTICLES OF INCORPORATION OF SALLIE KLINK'S BIRD HAVEN INC.

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

ARTICLE I NAME

The name of the corporation shall be: SALLIE KLINK'S BIRD HAVEN INC.

O APR 12 AM 9:50 ECRETARY OF STATE LLAHASSIE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

116 COMMERCIAL WAY, SUITE 5 SPRING HILL, FL 34606

ARTICLE III SHARES

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

1000 SHARES OF COMMON STOCK, EACH SHARE HAVING A PAR VALUE OF ONE DOLLAR (\$1.00)

<u>ARTICLE IV INITIAL REGISTERED AGENT</u>

The name and Florida street address of the initial registered agent are: JAMES E. MARCI 8090 GREENBRIER COURT SPRING HILL, FL 34606

الي

D03

ARTICLE V INCORPORATOR

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

JAMES E. MARCI 8090 GREENBRIER COURT SPRING HILL, FL 34606

Signature/Incorporator

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/Registered Agent

Date

OO APR 12 AM 9:50
SECRETARY OF STATE