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Requester's Name  J. Sond  19 Helenast  Lotz FL 33549  City/State/Zip Phone #	200003201332				
	Office Use Only				

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

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2.	(Co	rporation Name)	-	(Document #)		OO APR	* 3
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Examiner's Initials

### ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be:

Herpetological Concepts Inc.

### ARTICLE II PRINCIPLE OFFICE

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

Herpetological Concepts Inc. 919 Helena st Lutz, FL 33549

## ARTICLE III SHARES

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

120

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:
Thomas J. Weaver
1647 Osprey Ln
Lutz, FL 33549

# ARTICLE V INCORPORATORS

Thomas J. Weaver 1647 Osprey Ln	dresses of the incorporators Jordan M. Sund 919 Helena St Lutz,F1 33549	s to these Articles of Incorporation a Dustin Smith 1 <b>080</b> 0 US19 N #103 Pinwllas Park,F1 33782	re:
The undersigned incorporate the design of th	orators have executed thes	e Articles of Incorporation this	day of
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# CERTIFICATE OF DESIGNATION OF 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:

Herpetological Concepts Inc.

2. The name and address of the registered agent and office is:

Thomas J. Weaver 1647 Osprey Ln Lutz, FL 33549

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

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