Requester's Name LEDINETON H200 Commercial Way SPRING Hill, Fl. 34606

Office Use Only

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

| 1. | |
|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| (Corporation Name) | (Document #) |
| 2. | |
| (Corporation Name) | (Document #) |
| | |
| 3. (Corporation Name) | 00000331876UU |
| (Corporation Name) | (Document #) |
| 4. | |
| (Corporation Name) | (Document #) |
| ☐ 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 | AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger |
| OTHER FILINGS | REGISTRATION/QUALIFICATION |
| Annual Report Fictitious Name | ☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other |

Examiner's Initials

-- CR2E031(7/97)

ARTICLES OF INCORPORATION

OF

LEDINGTON'S INC.



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

ARTICLE 1 NAME

The name of the corporation shall be: LEDINGTON'S INC.

The principal place of business of this corporation shall be: 4200 COMMERCIAL WAY US HWY 19 SPRING HILL, FL.34606

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 1,000 SHARES COMMON PAR VALUE \$.01 PER SHARE

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V **OFFICERS DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are): PHIL LEDINGTON

PRESIDENT & DIRECTOR
4200 COMMERCIAL WAY
US HWY19
5PRING HIll, FL. 34606

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are): PHIL LEDINGTON PRESIDENT & DIRECTOR 4200 COMMERCIAL WAY SPRING HIll, FL. 34606 Signature(s) of Incorporator(s) STATE OF Florida COUNTY OF HERNANDO THE FOREGOING instrument was acknowledged and sworn to before me this $\mathcal{S}^{\mathcal{TH}}$ day of July 19 , by PHIL LEDINGTON (Name of incorporator)

Notary Public

Wy Commission Expires:

AMILE COMMISSION CC855349

Expires July 15, 2003

(SEAL)

(Name of Corporation)

LEDINGTON'S INC.

CERTIFICATE DESIGNATING REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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: | EDINGTON'S INC. | | | |
|----|-----------------------------------|------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| | | | | TALL SEC | |
| 2. | The name and address of the regis | tered agent and office | is: | REVASEE TO | |
| | 4200 COMMERCIAL | WAY US AW | v. 19 | ON THE STATE OF TH | ,) |
| | (P. O. E | OX NOT ACCEPTABL | E) | ⊅ | |
| | SPRING HILL | FL. 34606 | | | |
| | | CITY/STATE/ZIP) | | | |
| | 8 | SIGNATURE | Tw Ledy | the | |
| | | | (Corporate Offic | er) | |
| | | TITLE PRESI | DENT & DIRECT | ror | |
| | | DATE 07/05 | 12000 | | |
| | | | | | |

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607,325 FLORIDA STATUTES.

| ~ | SIGNATURE This reliante |
|---|-------------------------|
| | (Registered Agent) |
| | DATE 07/05/2000 |