

TRANSMITTAL LETTER

P00000082923

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: <sup>C.M.</sup> CARTER ENTERPRISES, Inc

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

000003379220--1

-08/31/00--01019--019

\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: CARL M. CARTER  
Name (Printed or typed)

10729 MEADOWLEA DRIVE  
Address

JACKSONVILLE, FLORIDA 32218  
City, State & Zip

(904) 662-1094  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 AUG 31 PM 2:52

APPROVED  
AND  
FILED

RECEIVED

00 AUG 31 PM 2:43

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

## Articles of Incorporation For Carter Enterprises, Inc. C.M.

THE UNDERSIGNED, acting as Incorporator(s) of a corporation, adopt the following articles of incorporation for such corporation:

1. The name of the corporation is Carter Enterprises, Inc.
2. The period of its duration is perpetual.
3. The purpose is to engage in any activities or business permitted under the laws of the United States and the state of Florida.
4. The corporation shall have authority to issue 100 shares, all of one class, \$ 1.00 par value.
5. The address of the corporate office is 10729 Meadowlea Drive, Jacksonville, Florida 32218 located in Duval County.
6. The name and address of its registered agent is Ross C Jenkins located at 6161 Arlington Expressway, Jacksonville, Fla. 32211.
7. The number of directors constituting its initial Board of Directors is two, whose name(s) and addresse are:  
Name: Carl Melvin Carter Address 10729 Meadowlea Drive, Jax. Fl. 32218  
Robin Marie Carter Address 10729 Meadowlea Drive, Jax, Fl. 32218
8. The name(s) and address(es) of the incorporators are:

Name Carl Melvin Carter Address 10729 Meadowlea Drive, Jax., Fl. 32218  
Name: Robin Marie Carter Address: 10729 Meadowlea Drive, Jax, FL 32218

Signature(s) of Incorporator(s)

State of Florida  
County of Duval

*Robin Marie Carter*

Before me, the undersigned authority, personally appeared CARL M CARTER & ROBIN M. CARTER, who are to me well known to be the persons described in and who subscribed the above articles of incorporation, and did freely and voluntarily acknowledge before me according to law that they made and subscribed the same for the uses and purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and my official seal, at Jacksonville, Florida in said county and state this 31<sup>st</sup> day of August, 2000

Notary Public, State of Florida

Printed Notary Name DEBRA A. KELLER

My Commission Expires:



APPROVED  
AND  
FILED

00 AUG 31 PM 2:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

*C.M.*  
CARTER ENTERPRISES, INC

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

CARL M. CARTER  
(NAME)

10729 MEADOWLARK DRIVE  
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

JACKSONVILLE, FLORIDA 32218  
(CITY/STATE/ZIP)

00 AUG 31 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

*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]*  
(SIGNATURE)

8/31/80  
(DATE)