Harkins and Harkins, Inc

P0/000003133

Florida Department of State PO Box 6327 Tallahassee, Fl. 32314

> 500003523445---1 -01/04/01--01072--020 ****122,50 *****78.75

Re: Harkins & Harkins, Inc.

Gentlemen:

Enclosed please find the original and one copy of the articles of incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of the Articles of Incorporation, and fee for Registered Agent designation for the above named corporation.

Very truly yours,

Wm. R. Harkins

Harkins & Harkins, Inc.

MAILING ADDRESS OF THE CORPORATION

6078 Sandpipers Drive Lakeland FL 33809

Telephone 863-853-2001

T. Burch JAN 9 2001

ARTICLES OF INCORPORATION

of

	Harkins, Inc.	
(name of	corporation)	
The undersigned acting as the incorporator Corporation Act, adopt(s) the following articles of its content of the corporation act and the corporation	rs of a corporation under the neorporation for such corpora	Florida Business ation:
ARTICLE I - CORPORATE NAME		OI JA SECR TALLA
The name of the corporation is:		JAN -4 CRLTAR LARASS
Harkins & Harkins, Inc.		
ARTICLE II	- DURATION	2: 24 5 17/1E 1.08/10/
This corporation shall exist perpetually unle	ess dissolved according to Flo	orida law.
ARTICLE II	l - PURPOSE	
The corporation is organized for the purpos under the laws of the United States and the State of	se of engaging in any activitie of Florida.	s or business permitted
ARTICLE IV - (CAPITAL STOCK	
The corporation is authorized to issue 50 \$ 1.00 per share.	000 shares of common stoo	ck, par value
ARTICLE V - INITIA The street address of the initial principal off	L PRINCIPAL OFFICE ice and, if different, the mailin	ng address is:
STREET ADDRESS 5517 US Highway 98 North	n Suite B	
CITY: Lakeland Mailing address, if different:	FLORIDA	ZIP 33809
STREET ADDRESS		
	_	
CITY	FLORIDA	ZIP
NAME		
ADDRESS		
CITY	FI ORIDA	7IP

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have2_	_ (two) directors init	ially. The number of		
directors may be either increased or diminished fro than one (1). The names and addresses of the init	om time to time by the By-Law tial director(s) of the corporati	s, but shall never be less on are as follows:		
than one (1). The hames and addresses of the him	liat director(d) of the corporati			
NAME: Wm. R. Harkins, EA				
ADDRESS: 6078 Sandpipers Drive				
CITY LAKELAND	FLORIDA	ZIP; 33809		
NAME Jean M. Harkins				
ADDRESS 6078 Sandpipers Drive				
CITY LAKELAND	STATE FLORIDA	ZIP 33809		
NAME				
ADDRESS		710		
CITY	STATE	ZIP		
	- INCORPORATORS			
The names and addresses of the incorporators sign	ning these Articles of Incorpo	oration are as follows:		
NAME: Wm. R. Harkins				
ADDRESS 6078 Sandpipers Drive	<u></u>			
CITY Lakeland	STATE FLORIDA	ZIP 33809		
NAME Jean M. Harkins				
ADDRESS 6078 Sandpipers Drive				
CITY Lakeland	STATE Florida	ZIP 33809		
NAME				
ADDRESS				
CITY	STATE	ZIP		
The undersigned incorporator(s) have executed the	nese Articles of Incorporation	this30		
day of <u>December</u> , 20 <u>00</u>				
(Signature)				
	Color of the the			
	•	(Signature)		

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Harkins & Harkins, Inc.	TALLAHASSEE,	01 JAN -4 P	FILED
(name of corporation)	STATE LORIDA	2:24	

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

6078 Sandpipers Drive, Lakeland FL. 33809 at:

has named: Wm. R. Harkins

located at the aforesaid address, as its registered agent to accept service of process within this state.

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.