

P01000003479

TRANSMITTAL LETTER

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

FILED

01 JAN -5 AM 10:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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-01/05/01--01096--001  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: BAYCREST INDUSTRIES, INC.

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

O \$70.00

☒ \$78.75

O \$122.50

O \$131.25

Filing Fee

Filing Fee & Certificate

Filing Fee  
& Certified Copy

Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Todd Berger  
810 63rd Avenue N.  
St. Petersburg, FL 33702  
(727) 522-3070

NOTE: Please provide the original and one copy of the ARTICLES OF INCORPORATION

ARTICLES OF INCORPORATION

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: BAYCREST INDUSTRIES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 5945 Carrier Street North, St. Petersburg, FL 33714.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand at \$1.00 par value.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Todd Berger, 810 63rd Avenue N., St. Petersburg, FL 33702.

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: John L. Howie, 5945 Carrier Street North, St. Petersburg, FL 33714.

  
Signature/Incorporator

1-3-2001  
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 provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations the obligations of my position as registered agent

  
Signature/Registered Agent

1/3/01  
Date

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CLERK OF STATE  
TALLAHASSEE, FLORIDA