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TRANSMITTAL LETTER

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

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-02/05/01--01142--004
*****87.50 *****87.50

SUBJECT: Alliance Knife of Florida, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: Thomas E. Martin, Esq.
Name (Printed or typed)

312 Walnut Street, Suite 2300
Address

Cincinnati, OH 45202
City, State & Zip

(513) 421-6630
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 FEB -5 AM 9:03

FILED

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

**ARTICLES OF INCORPORATION
OF
ALLIANCE KNIFE OF FLORIDA, INC.**

01 FEB -5 AM 9:03
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, desiring to form a corporation for profit under the Florida Business Corporation Act, does hereby certify as follows:

ARTICLE I

The name of said corporation is ALLIANCE KNIFE OF FLORIDA, INC.

ARTICLE II

The principal place of business and mailing address of the corporation is:

5448 Hoffner Avenue, Suite 103
Orlando, Florida 32812

ARTICLE III

The corporation is formed for the purpose of engaging in any lawful act or activity for which corporations may be formed under Chapter 607, inclusive, of the Florida Statutes, as now in effect or hereafter amended.

ARTICLE IV

The number of shares of stock which the corporation is authorized to have outstanding is One Thousand (1,000) shares, all of which shall be common shares, without par value.

ARTICLE V

The name and Florida street address of the registered agent is:

Ivan Cruz
5448 Hoffner Avenue, Suite 103
Orlando, Florida 32812

ARTICLE VI

The name and address of the Incorporator is:

William Lonnie Keith
3091 Triple Crown Drive
North Bend, Ohio 45052

IN WITNESS WHEREOF, the undersigned has hereunto subscribed his name this
29 day of January, 2001.

William Lonnie Keith
William Lonnie Keith, Incorporator

01 FEB - 5 AM 9:03
SECRETARY OF STATE
TAMPA, FLORIDA

FILED

ORIGINAL APPOINTMENT OF AGENT

Having been named as registered agent 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Ivan Cruz

Ivan Cruz, Registered Agent

1-30-2001

Date