TRANSMITTAL LETTER

Polocoo9/012

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

SUBJECT:											
	(Proposed corpo	rate name - must include sut	•								
			500494583	36 ²² 006							
			*****18.75 *	****78.7							
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for :								
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee	\$78.75	\$87.50								
rining 1 cc	& Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy								
		a coranica copy	& Certificate of								
			Status								
		ADDITIONAL CO	PY REQUIRED								
	•		······································								
FROM:	Robert J. Myers,	Eŝq.	<u> </u>								
	Name (Pr	inted or typed)									
	1135 Pasadena Ave	nue South, Suite 14	0 .								
		ddress	· · · · · · · · · · · · · · · · · · ·								
	S't Petersburg, Flo	orida 33707									
	City, S	State & Zip									
			•								
	(727) 347–5131	dephone number									
	Dayume 1e	асраоне пшноег									
			77 o								

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

OI SEP 13 PM 2: 59
SECRETARY OF STATE

ARTICLES OF INCORPORATION

FILED

OF

01 SEP 13 PM 2: 59

SOLUTIONS BY SAWNING, INC.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

SOLUTIONS BY SAWNING, INC.

The address of the principal office of this corporation shall be 3209 58th Street South, #131, Gulfport, Florida 33707, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the State of Florida.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 7,500 shares of common stock having \$1.00 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1135 Pasadena Avenue South, Suite 140, St Petersburg, Florida 33707, and the name of the initial registered agent of the corporation at that address is Robert J. Myers.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. OFFICERS AND DIRECTORS

This corporation shall have two (2) officers and two (2) directors initially. The names and street addresses of the initial officers and directors who shall hold office for the first year of the corporation, or until their successor is elected or appointed are:

ELENA M. SAWNING
President/Secretary/
Director

3209 58th Street South, #131 Gulfport, FL 33707

RALPH L. SAWNING Vice President/Treasurer/ Director

3209 58th Street South, #131 Gulfport, FL 33707

ARTICLE VI. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Robert J. Myers
Akerson Law Offices
1135 Pasadena Avenue South
Suite 140
St Petersburg, Florida 33707

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 167^{H} day of 567760862, 2001.

By:_

ROBERT J. MYERS,

Incorporator

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	o£	the	corp	orat	cion	is:			-		
					SO:	LUT	CONS	BY :	SAWNIN	G,	INC.		
2.	The	name	and	ade	dress	of	the	reg:	istere	d ag	gent	and	office
					Robe	ert	J1	Myera	s, Esq	•			
							(Na	me)					-
			11	.35	Pasad	ena	Ave	nue	South,	, Su	ite	140	
			(P.	0. 1	Box or	Mai	l Dro	р Вох	X TOK	CCEP:	PABLE)	
		_			St Pe	ters	burg	1, FI	<u> </u>	07			

is:

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 objections of my position as registered agent.

(CITY/STATE/ZIP)

9-10-2001
SECRETARY OF SILLAHASSEE, FLO

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 232314