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	ING & SPARGII		SECKE LARY OF STATE TALLAHASSEE TOO TION NAME (S) AND BOX	September 26, 2001	
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	Styl	es by Stiles, Inc.	01100		
	40100	100	740/	<u> </u>	
Filing Evidence  ⊠ Plain/Confirmation Copy			Type of Document  ☐ Certificate of Status		
☐ Certified Copy			□ Certificate of Good Standing		
			□ Articles Only		
Retrieval Request  Photocopy			□ All Charter Documents to Include Articles & Amendments □ Fictitious Name Certificate		
	□ Certified Copy		□ Other	RECEIVED  01 SEP 26 MID: 34  VISION OF CORPORATION	
	NEW FILINGS AM		MENTS	26 26	
X	Profit	Amendme	ent	MID 34	
	Non Profit	Resignation	on of RA Officer/Director	AT10	
	Limited Liability	Change o	f Registered Agent		
	Domestication	Dissolution	on/Withdrawal		
	Other	Merger			
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OTHER FILINGS		REGISTI	RATION/QUALIFICATION	準準維維率 [1] [1] 報塞塞塞塞 [1] [1]	
	Annual Reports	Foreign			
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	Reinstatement	Trademar	k		
		Other			

# ARTICLES OF INCORPORATION OF STYLES BY STILES, INC.

The undersigned, acting as incorporator of a Florida corporation under the Florida Business Corporation Act, Chapter 607 of the Florida Statutes, hereby adopts the following Articles of Incorporation for such Corporation:

### ARTICLE I NAME

The name of the Corporation is STYLES BY STILES, INC.

## ARTICLE II PRINCIPAL OFFICE AND MAILING ADDRESS

The address of the Corporation's principal office and mailing address is 315 Plant Avenue, Tampa, Florida 33601.

## ARTICLE III PURPOSE

The Corporation is organized for the purpose of transacting any and all lawful business for which corporations may be incorporated under the laws of Florida.

### ARTICLE IV CAPITAL STOCK

The Corporation is authorized to issue 10,000 shares of common stock, \$.01 par value per share.

# ARTICLE V INITIAL REGISTERED AGENT AND OFFICE

The name of the initial registered agent of the Corporation and the street address of the initial registered office of the Corporation are as follows:

Name

Address

William Kent Ihrig

101 East Kennedy Boulevard Suite 2800 Tampa, Florida 33602

#### ARTICLE VI INITIAL BOARD OF DIRECTORS

The Corporation shall initially have one (1) director to hold office until the first annual meeting of shareholders and until her successor has been elected and qualified, or until her earlier resignation, removal from office or death. The number of directors may be either increased or decreased from time to time in accordance with the Bylaws of the Corporation. The name and address of the initial director of the Corporation are:

Name

<u>Address</u>

Mary Ann Stiles

315 Plant Avenue Tampa, Florida 33601

#### ARTICLE VII INCORPORATOR

The name and address of the person signing these Articles as Incorporator are:

Name

Address

William Kent Ihrig

101 East Kennedy Boulevard Suite 2800

Tampa, Florida 33602

## ARTICLE VIII INDEMNIFICATION

The Corporation shall indemnify any person who is or was a Director, Officer, employee, or agent of the Corporation or was serving at the request of the Corporation as a Director, Officer, employee, or agent of another corporation, partnership, joint venture, trust, or other enterprise, to the fullest extent permitted by law.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation

this 25<sup>th</sup> day of September, 2001.

William Kent Ihrig, Incorporator

## CERTIFICATE OF DESIGNATION 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 Styles by Stiles, Inc.
- 2. The name and address of the registered agent and office are:

William Kent Ihrig 101 East Kennedy Boulevard

Suite 2800 Tampa, Florida 33602

SIGNATURE:

TITLE:

William Kent Ihrig, Incorporator

DATE:

September 25, 2001

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 EAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE:

William Kent Ihrig, Registered Agent

DATE:

September 25, 2001

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SECRETARY OF STATE