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TRANSMITTAL LETTER

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

Tallahassee, FL 323	14			
subject:s	& B Enterprises Sara (Proposed corp	sota . Tnc . orale name - must include su	· · · · · · · · · · · · · · · · · · ·	<i>t</i> •
			000466388: -11/02/0101029 *****70.00 ****	
Enclosed is an origin	al and one(1) copy of the articl	es of incorporation and a	check for:	
<b>≤ \$70.00</b> Filing Fee	Status  1 \$78.75 Filing Fee  2 Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	Status PY REQUIRED	
FROM:	Olin Boom Name (I	rinted or typed)	<del></del>	
	6763_Timberland_La	Address		. +-
	Sarasota, FL 3424 City	1 State & Zip		

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

Daytime Telephone number

## 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.

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ARTICLE 1

The name of the corporation shall be:

S & B Enterprises Sarasota, Inc.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

6763 Timberland Lane Sarasota, FL 34241

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

5,000 Shares of No Par Stock

<u>INITIAL REGISTERED AGENT AND STREET ADDRESS</u> The name and Florida street address of the initial registered agent are:

Olin Boom

6763 Timberland Lane Sarasota, FL 34205

INCORPORATOR

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

Olin Boom 6763 Timberland Lane Sarasota, FL 34205

Signature/incorporator

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent