

DATE MAY 13, 2002

Florida Department of State
Division of Corporations
P.O. Box 636
Tallahassee, FL 32302

PO200090100

Re: JENKINS HEARING AID, Inc.
(Name of Corporation)

100007191031--8
-08/19/02--01023--017
*****78.75 *****78.75

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$78.75

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

Judith Conner
(Individual's Name)

02 AUG 19 AM 10:34
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

Jenkins Hearing Aids, Inc.
(Name of Corporation)

MAILING ADDRESS OF CORPORATION		
11331 - NORTH NIGHT HAWK		
TERRACE		
JENKINS, Florida		
34449		
PHONE		
(352)	447-3199	Ext.
Area Code	Number	

ARTICLES OF INCORPORATION

of

JENKINS HEARING AID INC.

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME

The name of the corporation is:

JENKINS HEARING AID INC.

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ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 500 shares of common stock, par value \$ 1.00 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS 11331 - NORTH NIGHT HAWK TERRACE
CITY INGLIS FLORIDA ZIP 34449

Mailing address, if different

STREET ADDRESS
CITY FLORIDA ZIP

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME JUDI JENKINS
ADDRESS 11331 NORTH NIGHT HAWK TERRACE
CITY INGLIS FLORIDA ZIP 34449

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>JUDI JENKINS</u>		
ADDRESS	<u>11331-NORTH NIGHTHAWK TERRACE</u>		
CITY	STATE	ZIP	
<u>INGLIS</u>	<u>FLORIDA</u>	<u>34449</u>	
NAME	<u>DANA JENKINS</u>		
ADDRESS	<u>11331-NORTH NIGHTHAWK TERRACE</u>		
CITY	STATE	ZIP	
<u>INGLIS</u>	<u>FLORIDA</u>	<u>34449</u>	
NAME			
ADDRESS			
CITY	STATE	ZIP	

ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	<u>JUDI JENKINS</u>		
ADDRESS	<u>11331 NORTH NIGHT HAWK TERRACE</u>		
CITY	STATE	ZIP	
<u>INGLIS</u>	<u>FLORIDA</u>	<u>34449</u>	
NAME	<u>DANA JENKINS</u>		
ADDRESS	<u>11331-NORTH NIGHTHAWK TERRACE</u>		
CITY	STATE	ZIP	
<u>INGLIS</u>	<u>FLORIDA</u>	<u>34449</u>	
NAME			
ADDRESS			
CITY	STATE	ZIP	

The undersigned incorporator(s) have executed these Articles of Incorporation this 13th day of MAY, 2002

Judi Jenkins (Signature)
Dana Jenkins (Signature)
 _____ (Signature)

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

JENKINS HEARING AID INC.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 11331- NORTH NIGHTHAWK TERRACE
INGLIS, FLORIDA 34449

has named JUDI JENKINS

located at the aforesaid address, as its registered agent to accept service of process within this state.

JUDI JENKINS
11331- NORTH NIGHTHAWK TERRACE
INGLIS, FLORIDA 34449

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.

Judi Jenkins
(Signature)

May 13, 2019
(Date)

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TALLAHASSEE FLORIDA
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