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## Florida Department of State

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Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

# FLORIDA PROFIT CORPORATION OR P.A.

Jim & Wanda Austin, Inc.

Certificate of Status	1
Certified Copy	0 75.
Page Count	-03 (4)
Estimated Charge	\$78.75

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#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the putpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Jim & Wanda Austin, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Jim & Wanda Austin, Inc. 3906 SW Jarmer Road Port St. Lucie, FL 34953

#### ARTICLE III SHARES

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

500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

James C. Austin 3906 SW Jarmer Road Port St. Lucie, FL 34953

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

### ARTICLES V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

James C. Austin 3906 SW Jarmer Road Port St. Lucie, FL 34953

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

17th day of October 2002.

**Schoes C. Austin - Signature** 

# 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 THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation	is: Jim & Wanda Austin, Inc.			
•	The state of the s		* . *	 _ 2 h s
2. The name and address of the re	gistered agent and office is:  James C. Austin	PALL ALLESS	02 OCT 22	7
	Name	= 77	=	
	3906 SW Jarmer Road		φ	
	(P.O. Box or Mail Drop Box NOT Acceptable)		30	-
	Port St. Lucie, FL 34953			

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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Johnes C. Austin
SIGNATURE

October 17th, 2002

(Date)