

P02000133122

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

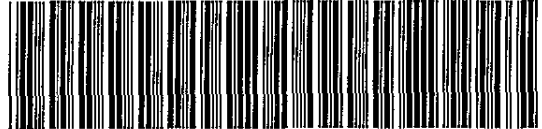
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
02 DEC 18 AM 11:25

20 12/20

TRANSMITTAL LETTER

ORIGINAL

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

SUBJECT: FIRST BROWNSVILLE COMPANY  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee  
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy  
 \$87.50 Filing Fee, Certified Copy & Certificate of Status  
**ADDITIONAL COPY REQUIRED**

FROM: ARCHIBALD HOVANESIAN  
Name (Printed or typed)

16 PORT ROYAL WAY  
Address

PENSACOLA, FL 32501-5774  
City, State & Zip

850-436-4461  
Daytime Telephone number

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

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02 DEC 18 AM 11:25

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

*FIRST BROWNSVILLE COMPANY*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

*3800 MOBILE HWY  
PENSACOLA, FL 32505*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*ALL LAWFUL PURPOSES FOR WHICH A CORPORATION MAY FUNCTION*

**ARTICLE IV SHARES**

The number of shares of stock is:

*1,000 (one thousand)*

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

*ARCHIBAZD HOVANESIAN  
16 PORT ROYAL WAY  
PENSACOLA, FL 32501-5774*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*ARCHIBAZD HOVANESIAN  
16 PORT ROYAL WAY  
PENSACOLA, FL 32501-5774*

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

*[Signature]*  
\_\_\_\_\_  
Signature/Registered Agent

*12-12-02*  
\_\_\_\_\_  
Date

*[Signature]*  
\_\_\_\_\_  
Signature/Incorporator

*12-12-02*  
\_\_\_\_\_  
Date