# P038801/8221

| (Requestor's Name)   |
|--|
| (Address)  |
| (Address)  |
| (City/State/Zip/Phone #)   |
| PICK-UP WAIT MAIL  |
| (Business Entity Name)   |
| (Document Number)  |
| Certified Copies Certificates of Status  |
| Special Instructions to Filing Officer:  B. J. M. Shaw gave  CORRECT AVA L  DATE 10 - 23 - 0.3  DATE 10 - 23 - 0.3 |

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SECRETARY OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL. 32314 OCTOBER 9, 2003

Reference: MICHAEL W. SANDERFUR, INC.

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$ 70.00, this check represents the cost of the filing fees for Articles of Incorporation.

Thank You,

BILL M. SHAW

MAILING ADDRESS OF COMPANY

MICHAEL W. SANDERFUR, INC. P.O. BOX 152779
TAMPA, FL. 33684-2779

PHONE: (813) 935-0044 FAX: (813) 935-0121

## ARTICLES OF INCORPORATION

of
MICHAEL W. SANDERFUR, INC.

|   | (name of corporation)                                |  |
|---|--|--|
| The undersigned subscriber(x) to these Artic<br>corporation under the laws of the State of                            | cles of Incorporation, natural person(4)  f Florida. | ø  |
| AR  | TICLE I - CORPORATE NAME                             | 03 OCT 13  |
| The name of the corporation is:   |  | 7  |
| M.  | ICHAEL W. SANDERFUR, INC.                            |  |
| p P. O. BOX   | 152779, TAMPA, FL. 33684-2<br>ARTICLE II - DURATION  | PP STATE STATE HE  |
| This corporation shall exist perpetually un   | aless dissolved according to Florida la              | 3. 20 Nichts   |
|   | ARTICLE III - PURPOSE                                |  |
| The corporation is organized for the purpo-<br>United States and the State of Florida.                                | se of engaging in any activities or busi             | ness permitted under the laws of the                                   |
| A   | RTICLE IV - CAPITAL STOCK                            |  |
| The corporation is authorized to issue _on  | e thousand shares (1,                                | 000 ) ofone  |
| Dollar(s) (\$ 1.00 par v  | value Common Stock, which shall be                   | designated "Common Shares."  |
| ARTICLE V - 11  | NITIAL REGISTERED OFFICE AN                          | D AGENT  |
| The name and street address of the Initia   |  |  |
| AME BILL M.SHAW   |  |  |
| DDRESS 550 N. REO STREET, SUITE 3   | 00   |  |
| ту ТАМРА  | FLORIDA  | ZIP 33609-1013   |
| ARTICLE   | VI - INITIAL BOARD OF DIRECT                         | ORS  |
| This corporation shall have one increased or diminished from time to time addresses of the initial director(x) of the | e by the By-Laws, but shall never be                 | The number of directors may be either less than one (1). The names and |
| NAME MICHAEL W. SANDERFUR   |  |  |
| ADDRESS 6907 E. 29th AVE.   |  |  |
| CITY TAMPA  | STATE FLORIDA  | zip 33619-1931   |
| NAME  |  |  |
| ADDRESS   |  |  |
| CITY  | STATE  | ZIP  |
| NAME  |  |  |
| ADDRESS   |  |  |
| CITY  | STATE  | ZĮP  |
|   |  |  |

## ARTICLE VII - INCORPORATORS

The names and addresses of the person(s) signing these Articles of Incorporation are as follows:

| NAME BILL M. SHAW/ BUSINESS M   | IANAGEMENT ACCO       | INTING SERVICES                       | , INC.                           |
|---|-----------------------|---------------------------------------|----------------------------------|
| ADDRESS 550 N. REO STREET. SUIT   |                       |                                       |                                  |
| CITY TAMPA  | STATE                 | FLORIDA                               | ZIP 33609-1013                   |
|   |                       |                                       |                                  |
| NAME  |                       | <del></del>                           |                                  |
| ADDRESS   |                       | <del></del>                           |                                  |
| CITY  | STATE                 |                                       | ZIP                              |
| NAME  |                       |                                       | <del></del>                      |
| ADDRESS   | <del></del>           |                                       |                                  |
| СІТҮ  | STATE                 | <del></del>                           | ZIP                              |
| IN WITNESS WHEREOF, the undersigned so  | ubscriber(s) have exe | cuted these Articles                  | of Incorporation this 9th        |
| day of OCTOBER , 2003   |                       |                                       |                                  |
|   |                       | Pain no                               |                                  |
|   |                       | My,                                   | Man (Seal)                       |
|   |                       | · · · · · · · · · · · · · · · · · · · |                                  |
|   |                       | <del></del>                           | (Seal)                           |
| •   |                       |                                       | (Seal)                           |
|   |                       | <del></del>                           | (000)                            |
|   |                       |                                       |                                  |
| STATE OF FLORIDA )  | İ                     |                                       |                                  |
| COUNTY OF HILLSBOROUGH  | SS                    |                                       |                                  |
| before me, a Notary Public authorized to take appeared  | e acknowledgements    | in the State and Co                   | unty set forth above, personally |
| BILL M. SHAW  |                       |                                       |                                  |
|   | <del></del>           |                                       |                                  |
| known to me and known to be the person  | nés) who executed     | the foregoing Articl                  | es of Incorporation and who      |
|   | -                     | cles of Incorporation                 | - · ·                            |
| ile.  |                       | or morporation                        | •                                |
| IN SHOW IN COMPANY OF A STATE OF | · , , ,               |                                       | 014                              |
| IN WITNESS WHEREOF, I have hereunto af  | iixed my hand and se  | ai, in the State and C                | ounty aforesaid, this 777        |
| day of October, 2003  | 0                     | 4                                     | <b>~</b> .                       |
|   | Const                 | arce C.                               | Autiener                         |
| (Notary Seat)   | (Notary Public        | , State of Florida at Las             | rge[]                            |
| Constance C Sufferior   | My Commissio          | on expires:                           | . •                              |

COMMISSION # CC984058 EXPIRES
February 21, 2004
BONDED THRU TROY FAIN INSURANCE, INC.

# CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

### CERTIFICATE OF REGISTERED AGENT

OF

MICHAEL W. SANDERFUR, INC.

(name of corporation)

NASCER THE CORPORATIONS

Pursuant to Florida Statutes Sections 48.091 and 607.034, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

| at | 550 | N. | REO | STREET, | SUITE | 300 |
|----|-----|----|-----|---------|-------|-----|
|    |     |    |     |         |       |     |

TAMPA, FL. 33609-1013

has named BILL M. SHAW

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

#### ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)