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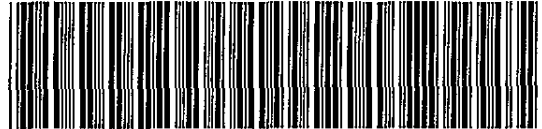
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4-26-04

April 15, 2004

- Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: APIAN STING OPERATION, INC.

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$ 122.50.

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

Yours truly

*x Belores B. Mills*

APIAN STING OPERATION OF FLORIDA, INC.

Mailing address of Corporation  
10867 COUNTRY HAVEN DRIVE  
LAKELAND, FL 33809

863-853-2001

**ARTICLES OF INCORPORATION**  
of

**APIAN STING OPERATION OF FLORIDA, 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:

**APIAN STING OPERATION OF FLORIDA, INC**

**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 1000 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		
10867 COUNTRY HAVEN DRIVE		
CITY    LAKELAND	FLORIDA	ZIP    33809

Mailing address, if different:

STREET ADDRESS		
CITY	FLORIDA	ZIP

NAME		
ADDRESS		
CITY	FLORIDA	ZIP

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TALLAHASSEE, FLORIDA

## ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) 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: DELORES D MILLS		
ADDRESS 10867 COUNTRY HAVEN DRIVE,		
CITY LAKELAND	STATE FL.	ZIP 33809
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP

## ARTICLE VIII - INCORPORATORS

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

NAME DELORES D MILLS		
ADDRESS 10867 COUNTRY HAVEN DRIVE		
CITY LAKELAND	STATE FL	ZIP 33809
NAME		
ADDRESS		
CITY	STATE FL.	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP

The undersigned incorporator(s) have executed these Articles of Incorporation this 15 day of April, 2004.

DeLores D. Mills (Signature)  
 \_\_\_\_\_ (Signature)  
 \_\_\_\_\_ (Signature)

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**APIAN STING OPERATION OF FLORIDA, 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

**5620 US HIGHWAY 98 NORTH, SUITE B, LAKE LAND FL 33809**

**Wm. R. Harkins, EA**

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

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

4/15/04  
Date