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04 JUN 17 AM 09:09  
DIVISION OF CORPORATION & BUSINESS  
ALBANY, NY 12242  
FILED  
JUN 17 PM 02:21

23309

7/1/2004

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Air Pro Oxygen, Inc.

Signature \_\_\_\_\_

Requested by: \_\_\_\_\_

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

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- ☒ Art of Inc. File \_\_\_\_\_
- \_\_\_\_\_ LTD Partnership File \_\_\_\_\_
- \_\_\_\_\_ Foreign Corp. File \_\_\_\_\_
- \_\_\_\_\_ L.C. File \_\_\_\_\_
- \_\_\_\_\_ Fictitious Name File \_\_\_\_\_
- \_\_\_\_\_ Trade/Service Mark \_\_\_\_\_
- \_\_\_\_\_ Merger File \_\_\_\_\_
- \_\_\_\_\_ Art. of Amend. File \_\_\_\_\_
- \_\_\_\_\_ RA Resignation \_\_\_\_\_
- \_\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_
- \_\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_
- \_\_\_\_\_ Cert. Copy \_\_\_\_\_
- ☒ Photo Copy \_\_\_\_\_
- \_\_\_\_\_ Certificate of Good Standing \_\_\_\_\_
- \_\_\_\_\_ Certificate of Status \_\_\_\_\_
- \_\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_
- \_\_\_\_\_ Corp Record Search \_\_\_\_\_
- \_\_\_\_\_ Officer Search \_\_\_\_\_
- \_\_\_\_\_ Fictitious Search \_\_\_\_\_
- \_\_\_\_\_ Fictitious Owner Search \_\_\_\_\_
- \_\_\_\_\_ Vehicle Search \_\_\_\_\_
- \_\_\_\_\_ Driving Record \_\_\_\_\_
- \_\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_
- \_\_\_\_\_ UCC 11 Search \_\_\_\_\_
- \_\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_
- \_\_\_\_\_ Courier \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

June 17, 2004

CAPITAL CONNECTION, INC.

SUBJECT: AIR PRO OXYGEN, INC.  
Ref. Number: W04000023392

We have received your document for AIR PRO OXYGEN, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You did not put a date in Article II.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Document Specialist  
New Filings Section

Letter Number: 704A00040518

**RE-SUBMIT**

PLEASE OBTAIN THE ORIGINAL  
FILE DATE

RECEIVED  
04 JUL 22 AM 9:30  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE  
06/10/2004

FILED  
06 JUN 17 AM 11:21  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
OF  
AIR PRO OXYGEN, INC.

ARTICLE I. NAME

NAME: The name of this corporation is AIR PRO OXYGEN, INC.

ARTICLE II. DURATION

This corporation shall have perpetual existence, commencing on the 10<sup>th</sup> day of June, 2004.

ARTICLE III. NATURE OF BUSINESS

This corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV. CAPITAL STOCK

This corporation is authorized to issue 7,500 shares of (\$1.00) par value common stock.

ARTICLE V. PREEMPTIVE RIGHTS

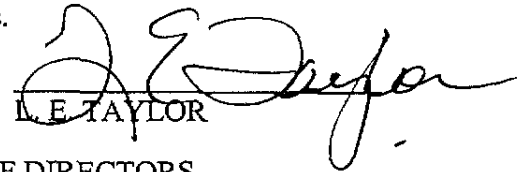
Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and initial principal office of this corporation is 1029 West Magnolia Street, Leesburg, Florida 34748 and the name of the initial registered agent of this corporation at that address is L. E. TAYLOR. The mailing address of the corporation is 973 Belle Oak Drive, Leesburg, Florida 34748. The

undersigned, L. E. TAYLOR, designated registered agent, hereby accepts that designation on behalf of the corporation.

ACKNOWLEDGMENT: Having been named to accept service of process for the above-stated corporation at the place designated in these Articles of Incorporation, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

  
L. E. TAYLOR

#### 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 bylaws but shall never be less than one (1). The names and addresses of the initial directors of this corporation are:

Charles W. Thorpe

973 Belle Oak Drive  
Leesburg, Florida 34748

Marlene E. Thorpe

973 Belle Oak Drive  
Leesburg, Florida 34748

#### ARTICLE VIII. SUBSCRIBER

The name and address of the subscriber signing these articles is:

L. E. TAYLOR, 1029 West Magnolia Street, Leesburg, Florida 34748.

#### ARTICLE IX. POWERS

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act, except this corporation shall not have the power to be a promoter, incorporator, partner, member, associate or manager of any corporation, partnership, joint venture, trust or other enterprise, unless fifty-one percent (51%) of the Board of Directors of this corporation shall resolve to do so in a regular or special meeting at any time before or after the corporation has acted.

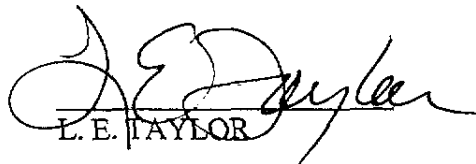
ARTICLE X. INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE XI. AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these articles of incorporation, or any amendment to them, and any rights conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these articles of incorporation on the 10<sup>th</sup> day of June, 2004.

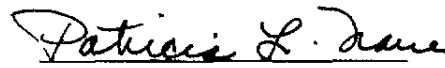
  
L. E. TAYLOR

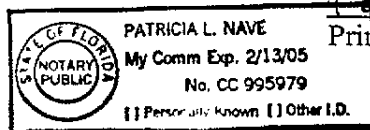
STATE OF FLORIDA

COUNTY OF LAKE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared L. E. TAYLOR, known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that he executed the same, that I relied upon the following form of identification of the above-named person: (personal knowledge) and that an oath was not taken.

WITNESS my hand and official seal in the County and State last aforesaid this 10<sup>th</sup> day of June, 2004.

  
Notary Public  
Patricia L. Nave  
Printed Name



My Commission Expires:

(SEAL)