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# FLORIDA PROFIT/NON PROFIT CORPORATION SHOWER LEG INC

| Certificate of Status | 1       |
|-----------------------|---------|
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#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose 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:

#### **SHOWER LEG INC**

## ARTICLE II PRINCIPAL OFFICE

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

8700 134TH ST SEMINOLE, FL 33776 ZUIS OCT 30 PM IZ: 01

#### ARTICLE III SHARES

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

1,500 Shares at no par value

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CAROL ANN FLEMING 8700 134TH ST SEMINOLE, FL 33776

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# ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

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

CAROL ANN FLEMING- PRESIDENT/ DIRECTOR 8700 134TH STREET SEMINOLE, FL 33776

## ARTICLE VI INCORPORATOR(S)

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

CAROL ANN FLEMING 8700 134TH STREET, SEMINOLE, FL 33776

15168822966

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

29TH day of OCTOBER 2019

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**CAROL ANN FLEMING** 

Signature

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS 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: SI    | HOWER LEG INC  | ······································ | <del></del> |         |
|--|--|--|-------------|---------|
| 2. The name and address of the registere | ed agent and office is:                                  | Sec                                    | 2           |         |
|  | CAROL ANN FLEMING Name                                   | SEURE LA<br>LLI AHAS                   | 2019 OCT    | <u></u> |
|  | 8700 134TH ST (P.O. Box or Mail Drop Box NOT Acceptable) |  | 30 PM12:    |         |
|  | SEMINOLE, FL 33776 (City / State / Zip)                  | <u> </u>                               | 12:01       | U       |

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.

CAROL ANN FLEMING (Date)
SIGNATURE