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TRANSMITTAL LETTER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 JAN -3 PM 1:36

TO: Dept. of State  
Division of Corporations  
P.O.Box 6327  
Tallahassee, Flo. 32314

FROM: James D. Spencer  
5821 Monroe St.  
New Port Richey, Fl. 34653

400001-168-104  
-01-03-17-1-141-105  
\*\*\*\*\*7.00 \*\*\*\*\*1.00

SUBJECT: Bob Roberts, Inc.

Enclosed please find the Articles of Incorporation and  
one(1) copy for the above corporation. Also please find  
a check in the amount of \$70.00.

SDC

ARTICLES OF INCORPORATION  
OF  
BOB ROBERTS, INC.

The undersigned incorporator(s), for the purposes of forming a corporation under the Florida Corporation Business Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

BOB ROBERTS, INC.

ARTICLE II PRINCIPAL OFFICE

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

608 S.W. 46th

OKLAHOMA CITY, OK. 73109

ARTICLE III CAPITAL STOCK

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

1,000 shares

ARTICLE IV REGISTERED AGENT & ADDRESS

The name and address of the initial registered agent is:

JAMES D. SPENCER

5821 MONROE STREET

NEW PORT RICHEY, FL. 34653

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ARTICLE V INCORPORATOR(S)

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

BOB ROBERTS

608 S.W. 46TH

OKLAHOMA CITY, OK. 73109

The undersigned has (have) executed these Articles of Incorporation this 16th day of November, 1994.

Bob Roberts / Pres.  
Signature/Title

\_\_\_\_\_  
Signature/Title

\_\_\_\_\_  
Signature/Title

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

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the stat. of Florida.

1. The name of the corporation is: BOB ROBERTS, INC.

2. The name & address of the registered agent office is:

JAMES D. SPENCER

(NAME)

5821 MONROE STREET

(ADDRESS/P.O. BOX NOT ACCEPTABLE)

NEW PORT RICHER, FL. 34653

(CITY/STATE/ZIP)

SIGNATURE

Bob Roberts

(corporate officer)

TITLE

Pres.

DATE

11/16/94

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

James D. Spencer

DATE

11/16/94

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TALLAHASSEE