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	TRANSMITTAL LETTE	ER
Division P.O. Box Tallahass SUBJECI	see, FL 32314 F: <u>PART II INC</u> I Corporate Name	FILED 1995 Juli 19 III 1: 19 SECRETARY OF STATE TALLAHASSEE, FLORIDA
	4555 J.E. MANATEE JTUART FL 3499-	

registered agent, and a check for \$70.00. Please return one copy of the Articles stamped with the filing date.

FROM:

100001384501 -01/19/95--01070--001 *****70.00 *****70.00

GERALD L. JUSDORF

Name (print or type)

4555 S.E. MANATES TERAACE

Address

<u>570ART FL 34997</u> City, State, Zip

(407) 287 7199

Area Code and Phone Number (Daytime)

А. ₁₄	, , , , , , , , , , , , , , , , , , ,			
	ARTICLES OF INC OF <u>PART</u> (Name of Cor	RPORATIC ZNC. rporation.)	N TALLATISE	FILED
The Florida	undersigned incorporators, for the pur Business Corporation Act, hereby adop	pose of forming a corp of the following Articles	oration under the of Incorporation .	19
ARTIC The na	TLE 1: NAME me of the corporation shall be: <u>PA</u>	RT II IN	10	
ARTIC The pri code):_	LE 2: PRINCIPAL PLACE OF BUSINI ncipal place of business of this corporati 455555.5.E. MANATE	ESS ion shall be (give <i>strert</i> a EFTERRACE_S	ddress and zip	<i>34</i> 9
ARTIC All stor numbe	LE 3: SHARES k issued by this Corporation shall be con of shares of stock that this corporation	mmon voting stock of a	single class. The	
The nai	LE 4: INITIAL REGISTERED AGENT ne of the initial registered agent is <u>64</u> 5 a m E 9.5 A bour	AND REGISTERED O	FFICE	
whose	egistered office is located at the place of	business stated in Artic	le 2 above.	
The nar are: 64 46	LE 5: INCORPORATORS nes and street addresses of the incorpora RALD L. JUSPONE, JEAN K. JUSP 55 S.E. NAMATES TEM, 4555 S.E. MANA PART FL 34997 STUMMET FL 34	ators to these Articles of PORF RITON Collowr RETAN 4573 Hayen 1 997 HILLIADO.	COMFRY, THERES	а Молто УДЕЛ Ва 100.43
The 1	Indersigned incorporators have executed 	d these Articles of Incorp <u> /</u> 19 <u>_</u> 75		
	re	Signature	Sur hum	
Signatu		An I I		

le . .

Articles of Incorporation Filing Fee — \$35.00

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to Florida law, 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 State of Florida.

1. The name of the corporation/professional association is: PART ZINC

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

GERALD L JUSDORF <u>4555 J.E. MANATEE TERRACE</u> Address (P.O. Box not acceptable) <u>570ART FL 34997</u> City, State, and Zip m 6

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 COM-PLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE OF REGISTERED AGENT DATE

Designation of Registered Agent Filing Fee -- \$35.00