## P95000011077

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 SUBJECT: Bones, Inc.	300001399515 -02/07/9501078009 ****122.50 ****122.50
Proposed Corporate Name	
Bones, Inc.	
Enclosed is an original and one copy of the Articles o registered agent, and a check for \$70.00. Please return o with the filing date.  FROM:  Lee Stepp	FILED FILED STATE
Name (print or type)	174 171
621 E. 8th Avenue	
Address	
Tompa, Florida 33605 City, State, Zip	<u> </u>
(313) 243-8463  Area Code and Phone Number (Daytime)	(

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## ARTICLES OF INCORPORATION OF

The undersigned incorporates, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation **ARTICLE 1: NAME** Lones, Inc. The name of the corporation shall be: ARTICLE 2: PRINCIPAL PLACE OF BUSINESS The principal place of business of this corporation shall be (give street address and zip code): 1621 E 8th Avenue Tampo, Florida 33605 ARTICLE 3: SHARES All stock issued by this Corporation shall be common voting stock of a single class. The number of shares of stock that this corporation is authorized to have outstanding at any (one -thousand) whose registered office is located at the place of business stated in Article 2 above. ARTICLE 5: INCORPORATOR The name and street address of the incorporator to these Articles of Incorporation is: Janet Lee Stepp 1621 C gli Murine Temper Florido 33405 The undersigned incorporator has executed these Articles of Incorporation this \_\_\_\_\_\_ Day of January 1995

Articles of Incorporation Filing Fee — \$35.00

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to Florida law, the undersigned Corp of Florida submits the following statement in agent, in the State of Florida.	designating the registered office/re	he State gistered
The name of the corporation/professional	association is: Bones, Inc	
2. The name and address of the registered as	gent and office is:	
Janet Lee Stepp		<del></del>
Full name		
1621 E. 8th Avenue		<del></del>
Address (P.O. Box not acceptable)		
Tampe, Florida 33400	5	
City, State, and Zip		
HAVING BEEN NAMED AS REGISTERED PROCESS FOR THE ABOVE STATED COR IN THIS CERTIFICATE, I HEREBY ACCE AGENT AND AGREE TO ACT IN THIS CAWITH THE PROVISIONS OF ALL STATUTI PLETE PERFORMANCE OF MY DUTIES, AT THE OBLIGATIONS OF MY POSITION AS	PORATION AT THE PLACE DESIG PT THE APPOINTMENT AS REGI PACITY. I FURTHER AGREE TO C ES RELATING TO THE PROPER AN AND I AM FAMILIAR WITH AND A	NATED STERED OMPLY D COM-
	SIGNATURE OF REGISTERED AG	LAND SS
	1/ 1998	B-6
	DATE	3.5.C
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	Designation of Registered Agent	33