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TRANSMITTAL LETTER

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

100001406211
02/14/95--01087--005
***11125 ***13125

SUBJECT: T. E. Roberts Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check
for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: Thomas Edward Roberts
Name (printed or typed)

3153 Whirlaway Tr.
Address

Tallahassee FL, 32308
City, State & Zip

(904) 877-0950
Daytime Telephone number

Will wait

2/14/95
(B)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

FILED
55 FEB 14 PM 1:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: T. E. Roberts Inc.

ARTICLE II PRINCIPAL OFFICE

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

3153 Whirlaway Tr.
Tallahassee FL 32308

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Thomas E. Roberts
3153 Whirlaway Tr.
Tallahassee FL 32308

ARTICLE V INCORPORATOR(S)

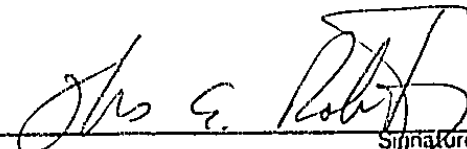
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

80% - Thomas E. Roberts
3153 Whirlaway Tr.
Tallahassee FL 32308

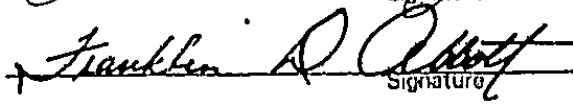
20% Franklin D. Abbott
4542 Meneaux Path
Pensacola FL 32504

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

_____ day of _____, 19____.



Signature



Signature

Signature

Articles of Incorporation
Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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 STATE OF FLORIDA.

1. The name of the corporation is: T.E. Roberts Inc.

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

Thomas E. Roberts

(Name)

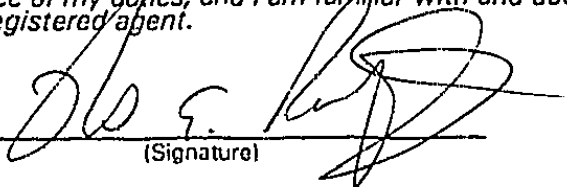
3153 Whirlaway Tr.

(P.O. Box not acceptable)

Tallahassee FL 32308

(City/State/Zip)

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)

(Date)