P95000019440

Akerman (Requestor's Name)

(Requestor's Name)

(Address)

(Address)

(City, State, Zip)

(Phone #)

(Phone #)

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):			TEST ST
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(Corporation Name)		(Document #)	
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NEW FILINGS	AMENDMENTS		
Profit	Amendment		
NonProfit	Resignation of R.A., Officer/Dire	ector	
Limited Liability	Change of Registered Agent		
Domestication	Dissolution/Withdrawal		$\frac{1}{2}$
Other	Merger		535
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REGISTRATION/
QUALIFICATION

Foreign

Limited Partnership

Reinstatement

Trademark

Annual Report

Fictitious Name

Name Reservation

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Framiner's Initials



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 9, 1995

AKERMAN

TALLAHASSEE, FL

SUBJECT: MARCOA PUBLISHING JACKSONVILLE, INC.

Ref. Number: W95000005303

We have received your document for MARCOA PUBLISHING JACKSONVILLE, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6903.

Nancy Hendricks Corporate Specialist

Letter Number: 895A00010665

ARTICLES OF INCORPORATION

95 MAR -9 PM 3: 2:

OF

MARCOA PUBLISHING JACKSONVILLE, INC.

Article I - Name

The name of the Corporation is MARCOA PUBLISHING JACKSONVILLE, INC.

Article II - Principal Office

The street address for the principal officer of this Corporation is 5960 Cornerstone Court, West, San Diego, California and the mailing address for the Corporation is Post Office Box 85999, San Diego, California 92186-5999.

Article III - Duration

The Corporation shall have perpetual existence.

Article IV - Purpose

This Corporation may engage in any activity or business permitted under the laws of the United States, laws of the State of Florida, and/or laws of any state within which it may be entitled to transact or engage in business.

Article V - Capital Stock

This Corporation is authorized to issue ten thousand (10,000) shares of one dollar (\$1.00) par value stock.

Article VI - Initial Registered Office and Agent

The street address of the initial registered office of this Corporation is 100 % Ashley % 1500, Tampa Florida 3366% and the name of the initial registered agent of this Corporation is

Altern & Dans

Article VII - Directors

The number of Directors of this Corporation shall be not less than one nor more than seven. The names and post office addresses of the members of the first Board of Directors of this Corporation who shall hold office for the first year of this existence of this Corporation or until their successors are elected and qualified, unless otherwise provided by the By-Laws are:

Michael J. Martella 5960 Cornerstone Court, West San Diego, California 92121-3711

Article VIII - Incorporator

The name and address of the Incorporator of this Corporation is Aileen S. Davis, 100 South Ashley Drive, Suite 1500, Tampa, Florida 33602.

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation this <u>7th</u> day of March, 1995.

Aileen S. Davis, As Incorporator

STATE OF FLORIDA)
COUNTY OF HILLSBOROUGH)

The foregoing instrument was acknowledged before me this \(\frac{\psi \eta}{\psi} \)
day of March, 1995 by Aileen S. Davis, \(\sigma \) who is personally known to me or \(\sigma \) who has provided a driver's license as identification and who has not taken an oath (check one).

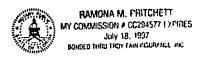
(Signature)

(Type or Print Name)

Notary Public

My Commission Expires:

My Commission Number is:



ACCEPTANCE OF REGISTERED AGENT

Having been named to accept service of process for the abovestated Corporation, at the place designated in the Articles of Incorporation, I hereby accept to act in this capacity, and agree to comply with the provisions of the Act relative to keeping open said office.

By:

Ailean S. Davis, As Registered Agent

W:\ATTY\ASD\CLIENTS\MARCOA\ARTICLES.

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS PROPERTY FLORIDA DEPARTMENT OF STATE **APPLICATION** Sandra B. Mortham 1996 SEP 27 AM 10: 12 Secretary of State FOR DIVISION OF CORPORATIONS REINSTATEMENT SECRETARY OF STATE TALLAHASSEE. FLORIDA P95000019440 **DOCUMENT #** 1. Corporation Name MARCOA PUBLISHING JACKSONVILLE, INC. Mailing Address P.O. BOX 4556- 504100 Principal Place of Business SAN DIEGO CA 101005000 92150 - 9100 5980 CORNERSTONE CT. WEST SAN DIEGO CA If above addresses are incorrect in any way, line through incorrect information and enter correction below. Date incorporated or Qualified
 To Do Business in Florida 3. New Mailing Office Address, if Applicable 03/09/1995 2. New Principal Office Address, If Applicable Applied For 5. FEI Number Suite, Apt. #, etc. Suite, Apt. #, ctc. Not Applicable 59 - 330440 City & State City & State CERTIFICATE OF STATUS DESIRED Country Zip Country 7. Names and Street Addresses of Each Officer and/or Director. (I lorida nonprofit corporations must list at least 3 directors) City / State / Zip Officer and/or Director
(Do NOT Use Post Office Box Numbers) Name of Officers and/or Directors Title(s) SAN DIEGO CA 5000 CORNERSTONE CT. WEST MARTELLA, MICHAEL J D REINSTATEMEN 101962216 %-0105-03 9. Name and Address of New Holphand And Assay 15. (U B. Name and Address of Current Registered Agent Street Address (F.O. Box Number is Not Acceptable) DAVIS, ALLEEN S 100 S. ASHLEY DR. Suite, Apt. #, Etc. **SUITE 1500** Zip Code State City TAMPA FL 33602 above paned corporation, am familiar with and accept the obligations of Section 607.0505, F.S. 10. I being appointed the pagetered agent of aun Signature of Registered Agent REGISTERED AGENT MUST SIGN (See other side for information on intangible tax.) 11. Does this corporation pay any intangible tax to the Yes 🛛 No 🗔 Dept. of Revenue under S. 199.032, Florida Statutes. 12. Learly that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing recently that i am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstalement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this solution is the section of the solution in the section of the section of the solution in the section of the secti on this application is true and accurate, and my signicture shall have the same legal effect as if made under oath.

Michael J. Martella

SIGNATURE:

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9-25-96