

1201 HAYS STREET
TALLAHASSEE, FL 32301
904 222 9171
904 222 0393 FAX

800-342-8086



P95000029069

ACCOUNT NO. : 072100000032

REFERENCE : 578872 98062A

AUTHORIZATION :

Patricia P. Junt

COST LIMIT : 9 70.00

ORDER DATE : April 12, 1995

ORDER TIME : 8:52 AM

ORDER NO. : 578872

CUSTOMER NO: 98062A

CUSTOMER: Ms. Pat Charter
MARC A. B. SILVERMAN, ESQ

700001455447

P. O. Box 6801

Clearwater, FL 34618

DOMESTIC FILING

NAME: GALIANO ASSOCIATES, INC.

☒ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Debbie Skipper

EXAMINER'S INITIALS:

OK
4/13

FILED
95 APR 13 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
GALIANO ASSOCIATES, INC.

FILED
95 APR 13 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

GALIANO ASSOCIATES, INC.

The address of the principal office of this corporation shall be 7177 30th Avenue North, St. Petersburg, Florida 33710, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having \$1.00 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Information Services, Inc.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. OFFICERS AND DIRECTORS

This corporation shall have one officer and one director, initially. The name and street address of the initial officer and director who shall hold office for the first year of the corporation, or until his successor is elected or appointed is:

Nidia Diaz	7177 30th Avenue North
Dir./Pres./Sec./Treas.	St. Petersburg, Florida 33710

ARTICLE VII. PREEMPTIVE RIGHTS

The corporation elects to have preemptive rights.

ARTICLE VIII. SPECIAL PROVISION

It is the intent of the Incorporator that the corporation will qualify under section 1244 of the Internal Revenue Code and shall take all actions necessary to obtain and maintain its status as an S corporation.

ARTICLE IX. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Information Services, Inc.
1201 Hays Street
Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of Corporation Information Services, Inc., has hereunto set their hand and seal of Corporation Information Services, Inc., on April 13, 1995.

CORPORATION INFORMATION SERVICES, INC.

By: Gail Shelby
Its Agent, Gail Shelby

ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN ARTICLES OF INCORPORATION

Corporation Information Services, Inc., a Florida corporation authorized to transact business in this State, having a business office identical with the registered office of the corporation named above, and having been designated as the Registered Agent in the above and foregoing Articles, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

CORPORATION INFORMATION SERVICES, INC.

By: Gail Shelby
Its Agent, Gail Shelby

AHH/dks

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 APR 13 AM 11:51

FILED

1204 HAYS STREET
TALLAHASSEE, FL 32304
(904) 222-9171
(904) 222-0103 FAX

800-342-8086



P95000029069

DIVISION

ACCOUNT NO. : 072100000032

REFERENCE : 578872 98062A

AUTHORIZATION

Patricia Pyjib

COST LIMIT : \$ 35.00

ORDER DATE : April 12, 1995

ORDER TIME : 5:52 PM

ORDER NO. : 578872

200001470622

CUSTOMER NO: 98062A

CUSTOMER: Ms. Pat Charter
Marc A. B. Silverman, Esq
P. O. Box 6801

Clearwater, FL 34618

CHANGE OF AGENT

NAME: GALIANO ASSOCIATES, INC.

RECEIVED
95 MAY -2 PM 2:48
SECRETARY OF STATE
TALLAHASSEE FLORIDA

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Debbie Skipper

*Corrected
← per*

*5/2
Jon
P.A.
Change*

CHARTER NO. _____

Date Filed _____

STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

1. The name of the corporation is: _____
GALIANO ASSOCIATES, INC.

2. The name and address of its present registered agent is:
CORPORATION INFORMATION SERVICES, INC.
1201 Hays Street
Tallahassee, Florida 32301

3. The name and street address to which its registered agent is to be changed is:
(P.O. BOX NOT ACCEPTABLE)
Nidia Diaz, 7177 30th Ave. N. St. Petersburg, FL 33710

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
MAY -2 PM 2:48

4. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical.

5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.

NIDIA DIAZ
(Typed or printed name and title)

Signature Nidia Diaz
(President or Vice President)

Date 4/18/95

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 RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT UNDER SECTION 607.0505, FLORIDA STATUTES.

Please Print/Type Name NIDIA DIAZ

Signature Nidia Diaz
Agent

Date 4/18/95