

P9500033859

TRANSMITTAL LETTER

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

95 APR 26 AM 7:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
900003465809
-04/26/95-201109--001
****131.25 ****131.25

SUBJECT: BOB AND ASSOCIATES 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: BOB L. COX
Name (printed or typed)

2440 KEYSTONE RD.
Address

TARPON SPRINGS, FL 34689
City, State & Zip

813-938-7488
Daytime Telephone number

5/2/95
(Signature)

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

ARTICLES OF INCORPORATION

APR 26 11 12 AM '89
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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:

BOB AND ASSOCIATES INC.

ARTICLE II PRINCIPAL OFFICE

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

THE MAILING ADDRESS SHALL BE 2440 KEYSTONE RD,
TARPON SPRINGS, FL,
34689

ARTICLE III SHARES

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

1000 SHARES, Common Stock, No PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Bob L. Cox
2440 KEYSTONE RD
TARPON SPRINGS, FL.
34689

ARTICLE V INCORPORATOR(S)

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

- (1) ROBERT M. COX
- (2) BETTY J. COX
- (3) BOB L. COX

ALL CURRENTLY RESIDING AT
2440 KEYSTONE RD.
TARPON SPRINGS, FL.
34689

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

24th day of APRIL, 1995.

- (1) Robert M. Cox Signature
- (2) Betty J. Cox Signature
- (3) Bob L. Cox 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: BOB AND ASSOCIATES INC.

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

BOB L. COX
(Name)

2440 KEYSTONE RD.
(P.O. Box not acceptable)

TARPON SPRINGS, FL 34689
(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.

Bob L Cox
(Signature)

4/24/95
(Date)