

P95000045001

TRANSMITTAL LETTER

FILED
95 JUN -6 AM 9:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: B + D CUTTERS 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

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-06/07/95--01034--003
****131.25 ****131.25

FROM: B + D CUTTERS INC
Name (printed or typed)

P.O. Box 987
Address

INGLIS, FL. 34449-0987
City, State & Zip

904-447-1806
Daytime Telephone number

*APL
6-12*

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

ARTICLES OF INCORPORATION

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:

B+D CUTTERS INC.

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ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 987
INGLIS, FL. 34449-0987

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:

RITA WECKESSE/C, EA, ATP
POB 640817 (10 N. MELBOURNE ST. BH 34465)
BEVERLY HILLS, FL. 34464-0817

ARTICLE V INCORPORATOR(S)

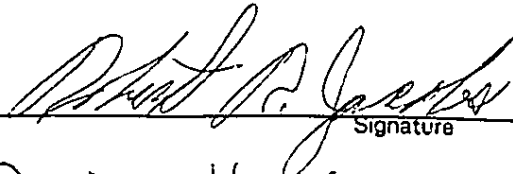
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ROBERT R. JACOBS
P.O.B. 987
INGLIS, FL. 34449

DAVID HOWIE
P.O.B. 987
INGLIS, FL 34449

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

1 day of JUNE, 19 95.



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: B. + D CUTTERS INC

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

RITA WECKESSER, EA, ATP
(Name)
10 N. MELBOURNE ST
(P.O. Box ~~not~~ acceptable)
BEVERLY HILLS, FL. 34465
(City/State/Zip)

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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.

Rita Weckesser EA ATP 6-1-95
(Signature) (Date)