P95000047894

ATTORNEYS AT LAW

236 McKenzie Avenue FOST OFFICK BOX 2526 PANAMA CITY, SLORIDA 32402-0160

Owen S. Trappe, Jr. Brian A. Dusseault 95 J.M 20 M 10: 35 VISION 61 Telephone (904)769-6139 GM

June 12, 1995

700001517407 -06/20/95--01016--013 \*\*\*\*\*70.00 \*\*\*\*\*70.00

Attorneys' Title Insurance Fund, Inc. 660 East Jefferson Street, Suite 200 Tallahassee, Florida 32301

Attn: Barbara Keys

Incorporation of PARTY CITY OF PANAMA CITY, INC

Dear Ms. Keys:

Re:

Please find enclosed the original and a copy of the Articles of Incorporation of Party City of Panama City, Inc. I have also enclosed a check in the amount of \$70.00 to cover the costs of the filing fees in this matter. I would appreciate your firm handling the delivery of these papers and returning the conformed copy of the Articles of Incorporation to me by regular mail.

Finally, I am enclosing a letter of authorization for your company to file the enclosed corporate documents. If you need any additional information, please do not hesitate to contact me.

Sincerely.

Stan Trappe

ST/tap Enc.

# ARTICLES OF INCORPORATION OF

#### PARTY CITY OF PANAMA CITY, INC.

#### **ARTICLE I**

The name of this corporation shall be PARTY CITY OF PANAMA CITY, INC.

#### **ARTICLE II**

This corporation shall have perpetual existence.

#### **ARTICLE III**

The primary purpose of this corporation shall be to engage in the business of selling party goods to the general public.

#### ARTICLE IV

The amount of capital stock authorized shall be one thousand (1,000) shares of common stock having a par value of One dollar (\$1.00) per share, making a total authorized capital stock of one thousand dollars (\$1,000.00).

#### **ARTICLE V**

The street address of the corporation's initial registered office is 1600 East 12th Street, Lynn Haven, Florida 32444. The name of the corporation's initial registered agent at such address is Phil Thomas. The street address of the corporation's principal office is 1600 East 12th Street, Lynn Haven, Florida 32444. The street address of the registered office and business address is the same.

#### ARTICLE VI

The amount of capital with which this corporation shall begin its business ventures is not less than ONE THOUSAND DOLLARS (\$1,000.00).

#### ARTICLE VII

The management of the corporate affairs of this corporation shall be managed by the Board of Directors.

#### **ARTICLE VIII**

The number of directors constituting the initial Board of Directors shall be not less than two (2) nor more than five (5).

#### ARTICLE IX

The name and address of each person who is to serve as a member of the initial Board of Directors are:

Phil Thomas, 1600 E. 12th Street, Lynn Haven, FL 32444; and

Sylvia F. Thomas, 1600 E. 12th Street, Lynn Haven, FL 32444.

#### **ARTICLE X**

The name and address of the incorporator signing these Articles of Incorporation are as follows:

Phil Thomas, 1600 E. 12th Street, Lynn Haven, FL 32444; and

#### **ARTICLE XI**

These Articles of Incorporation may be amended in the manner provided by law.

IN WITNESS WHEREOF, the undersigned has made and subscribed this, the Articles of Incorporation, in Bay County, Florida, for the uses and purposes herein expressed this <a href="#ref14th">14th</a> day of June, 1995.

PHIL THOMAS, Incorporator

### STATE OF FLORIDA COUNTY OF BAY

I hereby certify that on this day, before, me, an officer authorized to administer oaths and take acknowledgments, personally appeared PHIL THOMAS known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that he executed the same, and an oath was not taken.

(Check one:)	<b>52</b>	Said person(s) is/are personally known to me. Said person(s) provided me the following type of identificationFla. Driver's License
LINDA C. MUTAMERT NOTARY PUBLIC STATE OF FLORIDA MYCOMMISSION EXPIRES OCT 6, 1995 COMMISSION NO. CC149939		Witness my hand and official seal in the County and State last aforesaid this 14th day of June, 1995.  Linda C. Mummeré
		Notary Signature Linda C. Munnert
		Printed Name

instrument, who acknow not taken.	ledge	d before me that he executed the same, and an oath was
(Check one:)	<b>13</b>	Said person(s) is/are personally known to me. Said person(s) provided me the following type of identification a Fla. Driver's License.
(3-0AC M *AMERIT BOTANY PORCE, TATE OF FELORIDA BOTANY PORCE STREET OF FELORIDA BOTANY PORCE STREET COMMON CAMPO OF TATHON		Witness my hand and official seal in the County and State last aforesaid this 14th day of June, 1995.  Linda C. Mannace
		Notary Signature Linda C. Mummert
		Printed Name

#### CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted in compliance with said Act:

First - That PARTY CITY OF PANAMA CITY, INC., desiring to organize under the laws of the State of Florida, with its principal office, as indicated in the Articles of Incorporation, at the City of Lynn Haven, County of Bay, State of Florida, has named PHIL THOMAS, located at 1600 E. 12th Street, City of Lynn Haven, County of Bay, State of Florida, as its agent to accept service of process within this State.

DUIL THOMAS

June 14, 1995

DATED

#### ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at the place designated in this Certificate, I hereby accept to act in this capacity and agree to comply with the provision of said Act relative to keeping open said office.

PHIL THOMAS

STATE OF FLORIDA COUNTY OF BAY

I hereby certify that on this day, before, me, an officer authorized to administer oaths and take acknowledgments, personally appeared **PHIL THOMAS** known to me to be the person described in and who executed the foregoing

#### TRAPPE & DUSSEAULT, P. A.

ATTORNEYS AT LAW

936 McKensie Avenue POST OFFICK HOX 9826 PANAMA CITY, FLORIDA 32402-0160

Owen S. Trappe, Jr. Brian A. Dunneault

Telephone (904)769-6139

P950000 4, 199884

960000189728 -03/10/96--01032--015 \*\*\*\*\*35.00 \*\*\*\*\*35.00

Secretary of State Corporate Division Post Office Box 6327 Tallahassee, FL 32302

Re: PARTY CITY OF PANAMA CITY, INC. - Corporation Name Change

Dear Sir:

Please find enclosed an original and copy of the Articles of Amendment for the hame change of the above referenced corporation to:

PANHANDLE PARTIES, INC.

I have also included an address change in this Articles of Amendment. My check in the amount of \$35.00 is enclosed for the filing fees.

Please return a dated, file-stamped copy to me for my file. If you have any questions, please give me a call.

Sincerely.

ST/lcm

Enclosures

10/30/96

#### TRAPPE & DUSSEAULT, P. A.

ATTORNEYS AT LAW

236 McKensie Avenue POST OFFICK NOX 2526 PANAMA CITY, FLORIDA 32402-0160

Owen S. Trappe, Jr. Brian A. Dusscault

Telephone (904)769-6139

October 23, 1996

Ms. Darlene Connell
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re:

Party City of Panama City, Inc.

Ref. No. P95000047884

Dear Ms. Connell:

Please find enclosed an Application for Reinstatement for the above referenced corporation and my check in the amount of \$375.00 for the reinstatement fees.

I am also returning to you the Articles of Amendment for a name change for the corporation to be filed in this matter. If any additional information is needed, please do not hesitate to call me.

Sincerely.

Stan Trappe

ST/lcm

**Enclosures** 



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 16, 1996

STAN TRAPPE \*\*\* TRAPPE & DUSSEAULT, P.A. 236 MCKENZIE AVE. P. O. BOX 2526 PANAMA CITY, FL 32402-0160



SUBJECT: PARTY CITY OF PANAMA CITY, INC.

Ref. Number: P95000047884

We have received your document for PARTY CITY OF PANAMA CITY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

In order to file your document, the subject entity must first be reinstated.

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 1996 corporate annual report form in a timely manner. To reinstate the corporation you must submit the attached reinstatement application or annual report form and the appropriate fees.

The fees to reinstate the corporation are as follows: \$175 reinstatement fee, \$61.25 filing fee for the current year, and \$138.75 corporate supplemental fee for the current year.

Therefore, the total amount due to reinstate the corporation is \$375.00. Add an additional \$8.75 for each certificate of status requested.

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) 487-6906.

Darlene Connell Corporate Specialist

Letter Number: 096A00042834

#### ARTICLES OF AMENDMENT

1. The following provision of the Articles of Incorporation of PARTY CITY OF PANAMA CITY, INC., a Florida corporation, filed in Tallahassee, Florida on June 20, 1995, be and they hereby are amended in the following particulars:

Article One be and it hereby is amended to read as follows:

The name of this corporation is PANHANDLE PARTIES, INC. The mailing address of the corporation as of the date of this amendment is 6903 N. Lagoon Drive,/Panama City Beach, Florida 32408. Unit 11,

2. The foregoing amendments were adopted by the Stockholders and Directors of the corporation on the 4th day of September, 1996.

IN WITNESS WHEREOF, the undersigned President and Secretary of this corporation have executed these Articles of Amendment this 4th day of September, 1996.

#### PARTY CITY OF PANAMA CITY, INC.

By: PHIL THOMAS, President

By: SXLVIA F. THOMAS, Secretary

STATE OF FLORIDA COUNTY OF BAY

I hereby certify that on this day, before, me, an officer authorized to administer oaths and take acknowledgments, personally appeared PHIL THOMAS and SYLVIA F. THOMAS, President and Secretary, respectively of PARTY CITY OF PANAMA CITY, INC., a Florida corporation, known to me to be the persons described in and who executed the foregoing instrument, who acknowledged before me that they executed the same, and an oath was not taken.

(Check one:)

□ Said person(s) is/are personally known to me.

Said person(s) provided me the following type of

Linda C. Mummert Notary Public, State of Florida Commission Number: cc 501052 Commission Expires: 10/11/99 identification FL. D.L. #T520-675-42-441-0
FL. D.L. #T520-796-58-758-0
Witness my hand and official seal in the County and State last aforesaid this 4th day of September, 1996.

Linda C. Mummert
Notary Signature
Linda C. Mummert

**Printed Name** 

PI FASE READ	ALL INSTRUCTIONS	BEFORE COMPLET	ING THIS FORM.				
APPLICATION FOR	FLORIDA DEPARTME Sandra B. Mor	NT OF STATE	FILED  95 OCT 28 PM 3: 44  TALLAHASSEE, FLORIDA				
REINSTATEMENT	BIVESION OF COURD	700	L. ED				
DOCUMENT #	5 0000	TIOO	SE TOO T 28 PM 2				
1 Corporation Name			TALLAHANY DE DE				
PARTY CITY OF PANAMA CITY	, INC.		SSEE. FLORIDA				
Principal Place of Business  1600-Rest-13th-Str	1600-Bast-12th-	S <b>t.</b>					
Lynn-Heven,-FL-32444	bynn-Haven <sub>7</sub> -Fb-	32444					
If above addresses are incorrect in any way, line this	and prepared observation and unlet	rounction todaw	DO NOT WHITE IN THIS SPACE				
2 New Principal Office Address, If Applicable 664 W. 23rd Street	O Phil Thomas		porated or Qualified ness in Florida 6/20/95				
Suite, Apr. #, ntc	່ 6903 ກໍຕີເLagoon, #						
City & State Panama City, FI	City A State Panama City Beach	, FL 0	Not Applicable				
<sup>2p</sup> 32405 Country Bay	Zip 32408 Countr	Bay CENTIFICATE	E OF STATUS DESIRED				
7 Numes and Street Addresses of Each Officer and/		tions must list at least 3 directors)					
Title(s) and/or Selection	l on	Officer and/or Director 3 (Do NOT Use Post Office Box Numbers) 4 City / State / Zip					
President Phil Thomas	6903 N. L	1900 Bat 11/1.6, Fla	Mana City Book F/ 32408				
V. P. 5 / 77	11	11 11					
Section Oylvia Momas		2	000020005125 -11/08/3601044027				
			- 1 121				
<u> </u>	REIN	STATEMENT_	96 10/30/76				
			20				
B. Name and Address of Current F	legistered Agent	9. Name and # Name	Address of New Registered Agent				
		Name Street Address (P.O. Box Number is Not Acceptable) 9					
Phi cmas		Suite, Apl. #, Etc.	rte, Apt. *, Etc.				
664 23rd Street Panama City, FL 32405		City Sinto Zip Code					
10 1, being appointed the registered agent of the above	re_named corporation, am familiar wi	n and accept the obligations of Secti	on 607.0505, F.S.				
Signature of		-	Date Oct 8/1886				
Registered Agent But But But But But But But But But Bu							
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No 🗵 (See other side for information on intangible tax.)							
12 I do hereby certify that the information supplied with this filling is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k). Florida Statutes, I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver of trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this renstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and Dist affilling the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under cath							
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daylimo Phone 8							