# P95000049871

000001522150 -06/23/95--01074--008 \*\*\*\*122.50 \*\*\*\*122.50

June 22, 1995

Division of Corporations, New Corporations POB 6327 Tallahassee, Florida 32314

Dear Sir:

Enclosed are the Articles of Incorporation for Lakeside Distributing, Inc. and our check for \$122.50 for filing fees of and a certified copy of the articles.

Please return the documents to:

Mr. Ben H. Moore 1400 West Fairbanks Avenue, Suite 201 Winter Park, FL 32789

Thank you for your attention to this matter. Please contact me at 407-644-3119 as required.

Sincerely,

Benjamin H. Moore

PLS RETURN VIA FED EX USING ENCLOSED FED EX VOUCHER.

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## ARTICLES OF INCORPORATION

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OF

Lakeside Distributing, Inc.

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 1 NAME

The name of the corporation shall be:

Lakeside Distributing, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

19664 NW 83rd Place Miami, FL 33015

#### ARTICLE III SHARES

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

1,000 shares at \$1.00 Par Value

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Sharon Mitchell 19664 NW 83rd Place Miami, FL 33015

### ARTICLE V INCORPORATOR(S)

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

Sharon Mitchell 19664 NW 83rd Place Miami, FL 32015 ;

The undersign	ed incorporator(s)	has(have) executed these Articles of Incorporation t	his
	20th day of _	June ., 19 95.	
<u>+</u>	Moven	nitten M Signature	
<u></u>	<u> </u>	Signature	
		Signature	

# 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.

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1. The name of the corporation is	Lakeside Distributing, Inc.		
		S	
2. The name and address of the registered agent and office is:			
	Sharon Mitchell	A (5)	
<del></del>	(Name)	-	
1	.9664 NW 83rd Place		
(P.	O. Box not acceptable)		
	Miami, FL 33015		
	(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.

Max (Signature)