P95000 51093

Topo Spings	7CIDOD1516197 -06/19/9501021011 *****70.00 *****70.00
(City, State, Zip)	OFFICE USE ONLY
CORPORATION NAME 1. P. T. M. (Corporation	C(S) & DOCUMENT NUMBER(S) (if known):
2	
(Corporation	Name) (Decument #)
(Corporation	Name) (Document #)
4. (Corporation	Name) (Document #)
_	up time Certified Copy
Mail out Wil	wait Photocopy Certificate of Status
NEW FILINGS	F. *AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director F. CHESSER JUN 3 0 1995
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Change of Registered Agent Dissolution/Withdrawa! Merger
OTHER FILINGS	REGISTRATION/ QUALIFICATION
Annual Report	QUALIFICATION
Fictitious Name	Foreign
1	Limited Partnership

Examiner's Initials

Name Reservation

CR2E031(10/92)

Reinstatement Trademark

Other



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 21, 1995

BENNY MORRIS 952 OAKVIEW ROAD TARPON SPRINGS, FL 34689

SUBJECT: P.T.M. INTERNATIONAL, INC. Ref. Number: W95000012635

We have received your document for P.T.M. INTERNATIONAL, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

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) 487-6904.

Freida Chesser Corporate Specialist

Letter Number: 995A00030418

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Fallahassee, FL 32314		4	, , ,	
SUBJECT:		EAM MAR V		BMw
Enclosed is an original for : \$70.00 Filing Fee	and one (1) cop \$78.75 Filing Fee & Certificate	by of the articles of \$122.50 Filing Fee & Certified Copy	incorporation and a \$131.25 Filing Fee, Certified Copy & Certificate	a check
FROM:	BEN Nam 952	e (printed or typed) 〇Aドリモ(い		
	81	Address ON SP(N City, State & Zip 3 - 943 - 00 ne Telephone number		

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:

P.T.M. INTERNATIONAL, INC. ST POWER TEAM MARKETING, INC.

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

952 OAKVEIW 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:

1,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

BENNY MORRIS 952 OAKVEIN Rd TARPON Springs, FLA 34689

ARTICLE V INCORPORATORIS

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

...

BENNY + SANDY MORRIS

952 OAKVEIN Rd

BTARPON, Springs, FL. 34689

... Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuent to the provisions of section 607.0501 , 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.

	The of the corporation	is: FOWER FEAR IY	MARE THE G, INC
. The na	_	registered agent and office is	! -
	BENNY	G. MORRIS	7.5
	9520	(Name) AKVEFW Fd (P.O. Box NOI acceptable)	95 JUN ECRET LLAHA
		(P.O. Box NOT acceptable)	28 SSE SSE
	TARPON	Speings, FL.	34689 mg
		(City/State/Zip)	SI SA
			<i></i> 6
registe: visions :	red agent and agree k of all statutes relating t	signated in this certificate, I here to act in this capacity. I furthe to the proper and complete per cobligations of my position as i	er agree to comply with the formance of my duties, a
			1 1
		SIGNATURE SAL	ung S. Morris
	Levely on j		ug G. Morris