

P95000051569

TRANSMITTAL LETTER

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

800001527258
-06/29/95--01070--004
****131.25 ****131.25

SUBJECT: PIERCE SAFE INC.
(Proposed corporate name - must include suffix)

FILED
95 JUN 29 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Additional Copy Required

FROM: Joseph W. Shefner
Name (printed or typed)

110 West Colonial Dr. Studio A.
Address

Orlando FL 32801
City, State & Zip

407-649-8200
Daytime Telephone number

DP 6/29/95
6:30 PM

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

ARTICLES OF INCORPORATION

FILED

95 JUN 29 PM 4: 06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

PIERCE SAFE INC.

ARTICLE II PRINCIPAL OFFICE

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

110 WEST COLONIAL DR. studio A
ORLANDO, FL. 32801

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:

Joseph W. Shofner
110 WEST COLONIAL DR. studio A
ORLANDO FL. 32801

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Joseph W. Shofner
TERRI L. Shofner
110 West Colonial Dr studio A
Orlando FL. 32801

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

27 day of June, 19 95.

Joseph W. Shofner
Signature

Terri L. Shofner
Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT 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.

1. The name of the corporation is:

PIERCE SAFE TNC.

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

Joseph W. Shofner
(NAME)

110 West Colonial Dr. Studio A
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Orlando FL 32801
(CITY/STATE/ZIP)

FILED
95 JUN 29 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Joseph W. Shofner
(SIGNATURE)

6-27-95
(DATE)