

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-7777
904-222-0193

800-342-7076

CSC networks
PROFESSIONAL
LEGAL & FINANCIAL SERVICES

9500056339

ACCOUNT NO. : 072100000032

REFERENCE : 644090 90062A

AUTHORIZATION : *Patricia Pytko*

COST LIMIT : \$ 70.00

ORDER DATE : July 19, 1995

ORDER TIME : 8:55 AM

ORDER NO. : 644090

CUSTOMER NO: 90062A

000001542200

CUSTOMER: Mr. Pat Charter
MARC A. B. SILVERMAN, ESQ

P. O. Box 6001

Clearwater, FL 34618

DOMESTIC FILING

NAME: BOB OWENS ENTERPRISES, INC.

XX ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Debbie Skipper

EXAMINER'S INITIALS: _____

T. BROWN JUL 20 1995

FILED
95 JUL 20 PM 12:37
SECRETARY OF STATE
TALLAHASSEE, FL 32304

ARTICLES OF INCORPORATION
OF
BOB OWENS ENTERPRISES, INC.

FILED
95 JUL 20 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

BOB OWENS ENTERPRISES, INC.

The address of the principal office of this corporation shall be 2060 Calumet Street, Clearwater, Florida 34625, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having \$1.00 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Service Company.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. OFFICERS

The name and address of the initial officer of the corporation who shall hold office for the first year of the corporation, or until their successors are elected or appointed are:

Bob Owens	2060 Calumet Street
Pres./Sec./Treas.	Clearwater, Florida 34625

ARTICLE VII. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of
Corporation Service Company, has hereunto set their hand
and seal of Corporation Service Company on July 20, 1995.

CORPORATION SERVICE COMPANY

By: *Gail Shelby*
Its Agent, Gail Shelby

ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN ARTICLES OF INCORPORATION

Corporation Service Company, a Delaware
corporation authorized to transact business in this
State, having a business office identical with the
registered office of the corporation named above, and
having been designated as the Registered Agent in the
above and foregoing Articles, is familiar with and
accepts the obligations of the position of Registered
Agent under Section 607.0505, Florida Statutes.

CORPORATION SERVICE COMPANY

By: *Gail Shelby*
Its Agent, Gail Shelby

DAS/dks

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-0171
904-222-0193 FAX

800-342-8086

P95000056339
CS network
(PRESIDENTIAL
LEGAL & FINANCIAL SERVICES)

ACCOUNT NO. : 072100000032

REFERENCE : 649044 98062A

AUTHORIZATION : *Patricia Pyzdek*

COST LIMIT : \$ 35.00

ORDER DATE : July 26, 1995

ORDER TIME : 3:30 PM

ORDER NO. : 649044

CUSTOMER NO: 98062A

CUSTOMER: Ms. Pat Charter
Marc A. B. Silverman, Esq
P. O. Box 6801

Clearwater, FL 34618

CHANGE OF AGENT

NAME: BOB OWENS ENTERPRISES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Jennifer Moran

95 FILED
JUL 27 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FL 32304

Florida Department of State, Jim Smith, Secretary of State

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508,
Florida Statutes, the undersigned corporation organized under the laws of the State of
_____ submits the following statement in order to change its registered office
or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: _____

BOB OWENS ENTERPRISES, INC.

1b. Date of incorporation July 20, 1995 Document number FP45000856339

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

Corporation Service Company

1201 Hays Street, Tallahassee, Florida 32301

3. The name and address of the new registered agent and office:
(P.O. Box Not Acceptable)

BOB OWENS

2060 CALUMET STREET, CLEARWATER, FL 34625

The street address of its registered agent and the street address of the business office
of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by
an officer so authorized by the board.

Bob Owens PRES
SIGNATURE
July 24, 1995
DATE

BOB OWENS, PRESIDENT
Typed or printed name and title

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 RELATIVE TO THE PROPER AND COM-
PLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT
THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE Bob Owens
(Registered Agent)
DATE July 24, 1995

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