

P95000060233

TRANSMITTAL LETTER

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

SUBJECT: SAR Brand, Inc.  
(Proposed corporate name - must include suffix)

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: Anthony Sardinas  
Name (printed or typed)

600001547436  
-07/27/95--01048--009  
\*\*\*\*122.50 \*\*\*\*122.50  
25 SAR Brand, Inc. P.O. Box 6327  
Address

Tallahassee, FL 32314  
City, State & Zip

(904) 411-6511  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

July 28, 1995

ANTHONY V. SARDINAS  
655 JAMESTOWN BLVD.  
APT 1194  
ALTAMONTE SPRINGS, FL 32714

SUBJECT: SBA CORP.  
Ref. Number: W95000015198

We have received your document for SBA CORP. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Bylaws are not filed with this office. Please retain them for your records.

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.

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) 487-6923.

Doris McDuffie  
Corporate Specialist Supervisor

Letter Number: 595A00035869

FILED

ARTICLES OF INCORPORATION

95 AUG -7 PM 3:59

STATE OF FLORIDA  
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:

SPRICKMAN (XAL) Inc.

ARTICLE II PRINCIPAL OFFICE

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

401 SOUTH KIRKMAN RD. SUITE 325  
TALLAHASSEE, FL 32305

ARTICLE III SHARES

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

300 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CHRISTOPHER A. HENDERSON  
1065 SOUTH KIRKMAN RD. SUITE 1412  
TALLAHASSEE, FL 32305

**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):

ARTHUR J. [unclear]  
655 [unclear] [unclear] [unclear] [unclear]  
[unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear]  
[unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear]

[unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear]  
[unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear]  
[unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear]

JAMES A. ANDERSON  
[unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear]  
[unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear] [unclear]

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

10 day of July, 19 75.

[Signature] VP/Secretary  
Signature

[Signature] VP/Secretary  
Signature

[Signature] PRESIDENT  
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

FILED

95 AUG -7 PM 3:59

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: SAVONARD CORP. Inc.

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

CHARLES H. SAVONARD  
(NAME)

1115 W. 11th St. Tallahassee, FL 32304  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Tallahassee FL 32304  
(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.

[Signature]  
(SIGNATURE)

[Date]  
(DATE)