

PP5000062397

PO BOX  
70 Box 1010  
Boylston B.L.R. 33425

EFFECTIVE DATE  
7/20/95  
OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

- 1. OP Blue Vines, Inc  
(Corporation Name) (Document #)
- 2. \_\_\_\_\_  
(Corporation Name) (Document #)
- 3. \_\_\_\_\_  
(Corporation Name) (Document #)
- 4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in     Pick up time \_\_\_\_\_     Certified Copy
- Mail out     Will wait     Photocopy     Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

810001548873  
-0724/95--01046--019  
\*\*\*\*122.50 \*\*\*\*122.50

*[Handwritten signature]*  
7/26/95  
*[Handwritten initials]*

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

July 26, 1995

MR. BURNS  
POST OFFICE BOX 1040  
BOYNTON BEACH, FL 33425

SUBJECT: OL BLUE KNIVES, INC.  
Ref. Number: W95000015044

We have received your document for OL BLUE KNIVES, INC. and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The designation of the registered agent must be at a Florida street address.

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) 487-6878.

Terri Buckley  
Corporate Specialist

Letter Number: 695A00035533

RECEIVED  
7/20/95

ARTICLES OF INCORPORATION

We, the undersigned, as proper persons acting as incorporators of a corporation under the laws of the State of Florida, adopt the following articles of incorporation:

FIRST

The name of the corporation is: OI. BLUE KNIVES, INC

SECOND

The purpose of the corporation is: manufacture and sale of handmade hunting and folding knives.

THIRD

The maximum number of stock that this Corporation is authorized to have outstanding at any one time is: 1000 shares having a par value of \$1.00 per share.

FOURTH

The amount of capital with which this corporation will begin is not less than One hundred dollars (\$100.00). All or any portion of the capital stock may be issued in payment for real or personal property, services or any other right or thing having value, in the judgement of the Board of Directors, and when so issued shall become and be fully paid and nonassessable, the same as though paid for in cash; and the Directors shall be the sole judges of the value of any property, right or thing acquired in exchange for capital stock, and their judgement of such value shall be conclusive. It is the intention of the incorporator of this Corporation that the first Board of

Directors adopt the plan under section 1244 of the Internal Revenue code allowing a limited ordinary loss to individuals for loss on stock of a "small business corporation", which qualifies under the code.

FIFTH

The date when corporate existence begins shall be the date of subscription and acknowledgement of these Articles of Incorporation, and this Corporation shall exist perpetually.

SIXTH

This corporation shall have two Directors initially. The number of Directors may be increased or diminished from time to time by By-Laws adopted by the stockholders, but shall never be less than one (1).

SEVENTH

The address of the initial registered office of the corporation is: 2825 SW 5 ST, Boynton Beach, FL *ifb*  
33435.  
33435-. The Board of Directors may from time to time move the principal office to any other address in Florida.  
The name of its initial registered agent at such address is:  
Lydia F. Burns

EIGHTH

Address of the principal place of business is: 2825 SW 5th Street, Boynton Beach, FL 33435

NINTH

The number of directors constituting the initial board of

directors of the corporation is 2, and the names and address of the persons who are to serve as directors until the first annual meeting of shareholders or until their successors are elected and shall qualify are:

Name	Address
<u>David V. Burns, President</u>	<u>David V. Burns.</u>
<u>2825 SW 5th Street, Boynton Beach, FL 33435</u>	
<u>Lydia F. Burns, Secretary/Treasurer</u>	<u>Lydia F. Burns</u>
<u>2825 SW 5th Street, Boynton Beach, FL 33435</u>	

TENTH

The name and address of each incorporator is:

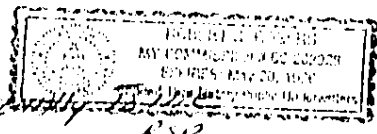
Name	Address
<u>David V. Burns</u>	<u>David V. Burns.</u>
<u>2825 SW 5th Street, Boynton Beach, FL 33435</u>	
<u>Lydia F. Burns</u>	<u>Lydia F. Burns</u>
<u>2825 SW 5th Street, Boynton Beach, FL 33435</u>	

STATE OF FLORIDA           )  
COUNTY OF PALM BEACH    )

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgements, personally appeared David V. Burns and Lydia F. Burns, to me known to be the person described as subscriber in and who executed the foregoing Articles of Incorporation, and acknowledged before me that they subscribed to those Articles of Incorporation.

IN WITNESS WHEREOF, my hand and official seal in the County and State named above this 20th day of July, 1995.

*Robert S. Rogers*  
\_\_\_\_\_  
Robert S. Rogers  
Notary Public



*both people signing above known personally to me*  
R.S.R.

**ACKNOWLEDGEMENT OF RESIDENT AGENT**

Having been named to accept service of process for the above stated Corporation at the place designated in the foregoing certificate, I hereby accept my appointment to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

*Lydia F. Burns*  
\_\_\_\_\_  
RESIDENT AGENT