

P96000000000092

**CAPITAL CONNECTION, INC.**

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)221-8870  
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
TOLL FREE No. 1-800-342-8062  
FAX (904) 222-1222

NAME \_\_\_\_\_  
FIRM \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
\_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

96 JAN -2 AM 10:52

JAN - 2 1995.

REQUEST TAKEN CONFIRMED APPROVED

DATE \_\_\_\_\_

TIME nc \_\_\_\_\_ CK No. \_\_\_\_\_

BY \_\_\_\_\_

WALK-IN  
Will Pick Up

1/2 11:00

RE: Lomax Investments  
Inc

C.C. FEE. DISBURSED

☒ Capital Express™  
☒ Art. of Inc. File  
\_\_\_\_\_  
☐ Corp. Record Search  
\_\_\_\_\_  
☐ Ltd. Partnership File  
\_\_\_\_\_  
☐ Foreign Corp. File  
\_\_\_\_\_  
☒ ( ) Cert. Copy(n)  
\_\_\_\_\_  
\_\_\_\_\_  
☐ Art. of Amend. File  
\_\_\_\_\_  
☐ Dissolution/Withdrawal  
\_\_\_\_\_  
☐ C U B.  
\_\_\_\_\_  
☐ Fictitious Name File  
\_\_\_\_\_  
\_\_\_\_\_  
☐ Name Reservation **800001674748**  
\_\_\_\_\_  
☐ Annual Report/Reinstatement **-01/02/95--01011--002**  
\_\_\_\_\_  
☐ Reg. Agent Service **\*\*\*\*122.50--\*\*\*\*122.50**  
\_\_\_\_\_  
☐ Document Filing  
\_\_\_\_\_  
\_\_\_\_\_  
☐ Corporate Kit  
\_\_\_\_\_  
☐ Vehicle Search  
\_\_\_\_\_  
☐ Driving Record  
\_\_\_\_\_  
☐ Document Retrieval  
\_\_\_\_\_  
\_\_\_\_\_  
☐ UCC 1 or 3 File  
\_\_\_\_\_  
☐ UCC 11 Search  
\_\_\_\_\_  
☐ UCC 11 Retrieval  
\_\_\_\_\_  
\_\_\_\_\_  
☐ File No.'s, \_\_\_\_\_ Copies  
\_\_\_\_\_  
☐ Courier Service  
\_\_\_\_\_  
☐ Shipping/Handling  
\_\_\_\_\_  
☐ Phone ( )  
\_\_\_\_\_  
☐ Top Priority  
\_\_\_\_\_  
☐ Express Mail Prop.  
\_\_\_\_\_  
☐ FAX ( ) pgs. \_\_\_\_\_

**SUBTOTALS**

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$
.....	\$

Please remit invoice number with payment  
TERMS: NET 10 DAYS FROM INVOICE DATE  
1 1/2% per month on Past Due Amounts  
Past 30 Days, 18% per Annum.

THANK YOU  
from  
Your Capital Connection

RECEIVED  
96 JAN -2 AM 9:00  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 JAN -2 AM 10:52

ARTICLES OF INCORPORATION  
OF  
LOMAX INVESTMENTS, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Lomax Investments, Inc.

ARTICLE II PRINCIPAL OFFICE

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

151 Regions Way, Suite A  
Destin, Florida 32541

ARTICLE III CAPITAL STOCK

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

David A. Owen  
743 Hwy 98, East  
Suite #5  
Destin, FL 32541

ARTICLE V INCORPORATOR

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

David A. Owen  
743 Hwy 98, East  
Suite #5  
Destin, FL 32541

The undersigned has (have) executed these Articles of Incorporation this 26th day of December, 1995.

  
\_\_\_\_\_  
Incorporator

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

96 JAN -2 AM 10:52

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: Lomax Investments, Inc.
2. The name and address of the registered agent and office is:

David A. Owen  
743 Hwy 98, East, Suite 5  
Destin, FL 32541

SIGNATURE   
(Corporate Officer)

TITLE Incorporator

DATE 12/26/95

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 

DATE 12/26/95