

01/11/96 10:37 FAX 813 547 8745

Termin

0001

CERTIFIED COPIES: 0

NUMBER OF PAGES: 3

ESTIMATED CHARGE: \$70.00

CERTIFICATE OF STATUS: 0

METHOD OF DELIVERY: FAX

ACCOUNT NUMBER: 072100000173

Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document.

((H96000000525))

** ENTER 'M' FOR MENU. **

ENTER SELECTION AND <CR>:

P

Terminal Emulation

CONNECTED 0:03:51

File Edit Services Special

((H96000000525)) ELECTRONIC FILING COVER SHEET

TO: DIVISION OF CORPORATIONS

FROM: AL CLARK

DEPARTMENT OF STATE

12600 SOUTH BELCHER RD

STATE OF FLORIDA

SUITE 104E

409 EAST GAINES STREET

LARGO FL 34643- 02-

TALLAHASSEE, FL 32399

CONTACT: AL CLARK

FAX: (904) 922-4000

PHONE: (813) 535-4211

FAX: (813) 547-8745

((H96000000525))

DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: BOTTOM LINE OF PINELLAS INC.

FAX AUDIT NUMBER: H96000000525

CURRENT STATUS: REQUESTED

DATE REQUESTED: 01/11/1996

TIME REQUESTED: 09:45:07

CERTIFIED COPIES: 0

CERTIFICATE OF STATUS: 0

NUMBER OF PAGES: 3

METHOD OF DELIVERY: FAX

ESTIMATED CHARGE: \$70.00

ACCOUNT NUMBER: 072100000173

Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document.

((H96000000525))

** ENTER 'M' FOR MENU. **

ENTER SELECTION AND <CR>:

F1=Help F10=Menu bar F5=Logging [OFF] F6=Printer [ON]

P

Terminal Emulation

CONNECTED 0:04:10

File Edit Services Special

((H96000000525)) ELECTRONIC FILING COVER SHEET

TO: DIVISION OF CORPORATIONS

FROM: AL CLARK

DEPARTMENT OF STATE

12600 SOUTH BELCHER RD

STATE OF FLORIDA

SUITE 104E

409 EAST GAINES STREET

LARGO FL 34643- 02-

TALLAHASSEE, FL 32399

CONTACT: AL CLARK

FAX: (904) 922-4000

PHONE: (813) 535-4211

FAX: (813) 547-8745

((H96000000525))

DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: BOTTOM LINE OF PINELLAS INC.

FAX AUDIT NUMBER: H96000000525

CURRENT STATUS: REQUESTED

DATE REQUESTED: 01/11/1996

TIME REQUESTED: 09:45:07

CERTIFIED COPIES: 0

CERTIFICATE OF STATUS: 0

NUMBER OF PAGES: 3

METHOD OF DELIVERY: FAX

ESTIMATED CHARGE: \$70.00

ACCOUNT NUMBER: 072100000173

Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document.

((H96000000525))

** ENTER 'M' FOR MENU. **

ENTER SELECTION AND <CR>:

RECEIVED

H9600000525

ARTICLES OF INCORPORATION

FILED
95 JAN 11 AM 11:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BOTTOM LINE OFF-PINELLAS INC.

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:

BOTTOM LINE OFF-PINELLAS INC.

ARTICLE II PRINCIPAL OFFICE

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

5728 CALAIS BLVD #5
ST PETERSBURG FL 33714

ARTICLE III SHARES

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

1000 SHARES
NO PAR.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

PREPARED BY
SUSAN A WILSON
5728 CALAIS BLVD #5
ST PETERSBURG FL 33714
813-527-3232

SUSAN A WILSON
5728 CALAIS BLVD
#5
ST PETERSBURG
FL 33714 H9600000525

H96000000525

ARTICLE V INCORPORATION(S)

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

SUSAN A. WILSON
5728 CALAIS BLVD #5
ST PETERSBURG, FL 33714

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

8 day of JANUARY, 19 96.

Susan A. Wilson President
Signature/Title

Signature/Title

Signature/Title

H956000000525

#96 000000525

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA
STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS
OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGN-
ATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF
FLORIDA.

1. The name of the corporation is: BOTTOM LINE OIL

PINELLAS INC.

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

SUSAN A. WILSON

(Name)

5728 CALAIS BLVD

(P.O. Box no) acceptable)

ST PETERSBURG FL 33704

(City/State/Zip)

FILED
96 JAN 11 AM 11:52
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 perfor-
mance of my duties, and I am familiar with and accept the obligations of my position
as registered agent.

[Signature]

(Signature)