

JAN 17 1996 15:11 00 00 00 00 P.01 03

096000005469

TO: DIVISION OF CORPORATIONS  
DEPARTMENT OF STATE  
STATE OF FLORIDA  
409 EAST GAINES STREET  
TALLAHASSEE, FL 32399  
FAX: (904) 922-4000

FROM: THE COMPANY CORPORATION  
201 N WALNUT ST  
CHRISTINA CENTRE THREE  
WILMINGTON DE 19801-  
CONTACT: KINDERLY ANDRAS  
PHONE: (302) 575-0440  
FAX: (302) 575-1346  
DOCUMENT TYPE: FLORIDA PROFIT CORPORATION

((H96000000837))  
OR P.A.

NAME: MICHAEL SHRR, INC.  
FAX AUDIT NUMBER: H96000000837  
DATE REQUESTED: 01/17/1996  
CERTIFIED COPIES: 0  
NUMBER OF PAGES: 2  
ESTIMATED CHARGE: \$70.00

CURRENT STATUS: REQUESTED  
TIME REQUESTED: 14:47:42  
CERTIFICATE OF STATUS: 0  
METHOD OF DELIVERY: FAX  
ACCOUNT NUMBER:

076660001006

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.  
((H96000000837))  
\*\* ENTER 'M' FOR MENU. \*\*  
ENTER SELECTION AND <CR>:

FILED  
95 JAN 17 PM 4:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1/18  
RECEIVED  
95 JAN 17 PM 4:00  
DIVISION OF CORPORATIONS

JAN-17-1996 15:31

H96000000837

00

00

00

00

00

00

P.02/03

ARTICLES OF INCORPORATION  
OF  
Michael Sher, Inc.

The undersigned natural person(s), of the age of 21 or more, acting to form a corporation under the corporate laws of the state of Florida do hereby certify the following:

FIRST: The name of the corporation shall be Michael Sher, Inc.

SECOND: The address of the initial registered office of the corporation is 200 - A John Knox Road, Tallahassee FL 32303-6643, County of Leon. The name of the registered agent located at said address is Larry Wolfe.

THIRD: The principal address of the corporation is 1600 Gulf Blvd., Clearwater FL 34640.

FOURTH: The purpose for which this corporation is organized shall be to engage in any lawful act or activity for which corporations may be organized under the Florida Business Corporation Act.

FIFTH: The total authorized stock of this corporation is divided into 10,000 shares of no par value.

SIXTH: The number of directors constituting the initial board of directors is two, and the name(s) and address(es) who will serve as directors until the first annual meeting of shareholders or until their successors are as follows:

Michael Sher PO Box 1167, Indian Rock Beach FL 34635  
Daphne Sher PO Box 1167, Indian Rock Beach FL 34635

SEVENTH: The duration of the corporation is perpetual.

EIGHT: This is Close Corporation.

NINTH: The name(s) and address(es) of the persons who are to act as incorporator(s) are as follows:

Bonnie J. Bennett c/o The Company Corporation  
Three Christina Centre, 201 N. Walnut St., Wilmington DE 19801

We (I), the undersigned, being all the incorporators of the corporation identified above, declare that we have examined the foregoing this 15th day of January, 1996.



State of Delaware

County of New Castle

THE FOREGOING instrument was acknowledged and sworn to before me this 15th day of January, 1996 by Bonnie J. Bennett.

SUBMITTED TO  
NOTARY PUBLIC-DELAWARE

Appointed October 6, 1994

Term 2 Years

  
Notary Public

This document was prepared by Bonnie J. Bennett, Three Christina Centre, 201 N. Walnut Street, Wilmington DE 19801 (302) 575-0440

H96000000837

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR  
THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON  
PROCESS MAY BE SERVED.**

In compliance with Section 607.1507, Florida Statutes, the following is submitted:

First, this Michael Sher, Inc.

desiring to organize under the laws of the state of Florida with its principal place of business located in the city of Clearwater, State of Florida, has named Larry Wolfe located at 200 - A John Knox Road, Tallahassee FL 32303-6643 as its agent for service of process within Florida.

Having been named to accept service of process for the above stated corporation, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties.

  
Larry Wolfe

January 11, 1996

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

55 JAN 17 PM 4:58

FILED

MICHAEL SHEH, INC.  
P.O. BOX 1167  
INDIAN ROCKS BEACH, FL 34635

City/State/Zip

Phone #

Office Use Only

**P96000005469**  
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_ (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 checked="" 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

0000000000-0000-0000-0000

000002321480--2  
-10/16/97--01016--014  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

**10-17-97**

Florida Department of State, Sandra B. Mortham, Secretary of State

\*\*\* FILING FEE: \$35.00 \*\*\*

**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 FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: MICHAEL SHER, INC.
2. The mailing address of the corporation is: 1660 GULF Blvd #804  
CLEARWATER, FL 33767
3. Date of incorporation/qualification: 1/17/96 Document number: H96000600837
4. The name and address of the current registered agent and office:  
LARRY WOLFE  
200 -A JOHN KNOX RD  
TALLAHASSEE, FL 32303-6643
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)  
MICHAEL SHER  
1660 GULF Blvd #804  
CLEARWATER, FL 33767

The street address of its registered office 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.

Michael Sher  
(Signature of an officer, chairman or vice chairman of the board)

10/10/97  
(Date)

MICHAEL SHER PRESIDENT  
(Printed or typed name and title)

10/10/97  
(Date)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Michael Sher  
(Signature of Registered Agent)

10/10/97  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)