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ACCOUNT NO. # 07210000000002

REFERENCE # 006498 00069A

AUTHORIZATION #

*Patricia Pyzals*

COST LIMIT # \$ 70.00

ORDER DATE # January 31, 1996

ORDER TIME # 11:13 AM

ORDER NO. # 006498

CUSTOMER NO: 00069A

CUSTOMER: R. John Cole, II, Esq  
R. JOHN COLE, II, P.A.

P. O. Box 49136

Sarasota, FL 34230-6136

DOMESTIC FILING

NAME: KING JAMES-WEST PALM,  
INCORPORATED

☒ ARTICLES OF INCORPORATION  
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: CAROL HENSAL

EXAMINER'S INITIALS:

T. BROWN FEB - 1 1996


RECEIVED  
96 JAN 31 PM 1:18  
DIVISION OF CORPORATION

FILED  
96 JAN 31 AM 10:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CONSENT TO USE OF CORPORATE NAME**

I, JAMES VERNON MONTONEY, as the President of KING JAMES, INC., a Florida Corporation, hereby consent to the use of that name by the proposed corporate entity KING JAMES-WEST PALM, INCORPORATED, as its corporate name, and for any other purpose which said corporation deems necessary to effectuate and carry out its lawful business purposes.

DATED on this the 30<sup>th</sup> day of January, 1996.

  
JAMES VERNON MONTONEY,  
as President  
KING JAMES, INC.

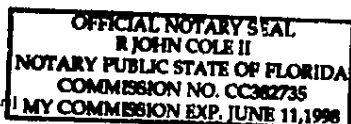
STATE OF FLORIDA  
COUNTY OF SARASOTA

I HEREBY CERTIFY that on this day, before me, an officer authorized in the State aforesaid and in the County aforesaid to take acknowledgements, personally appeared, JAMES VERNON MONTONEY, President of KING JAMES, INC., personally known to me or who has produced 1A, as identification, and who did (did not) take an oath.

WITNESS my hand and official seal in the County and State aforesaid on this the 30<sup>th</sup> day of January, 1996.

  
Notary Public

My commission expires:



[c:\wpf\epicons-use nar]

R. John Cole II  
Print Name

**ARTICLES OF INCORPORATION  
OF  
KING JAMES-WEST PALM, INCORPORATED**

96 FILED  
JAN 31 AM 10:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

**KING JAMES-WEST PALM, INCORPORATED**

**ARTICLE II PRINCIPAL OFFICE**

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

**7501 WEEPING WILLOW BLVD.  
SARASOTA, FLORIDA 34241**

**ARTICLE III CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

**ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is:

**R. JOHN COLE, II, ESQUIRE  
46 NORTH WASHINGTON BOULEVARD, SUITE 12  
SARASOTA, FLORIDA 34236**

**ARTICLE V INCORPORATOR**

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

**JAMES VERNON MONTONEY  
7501 WEEPING WILLOW BLVD.  
SARASOTA, FLORIDA 34241**

The undersigned has executed these Articles of Incorporation this the 30<sup>th</sup> day of January, 1996.

[e-wpDepArticles Inc]

James Vernon Montoney  
JAMES VERNON MONTONEY, Incorporator

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

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:

**KING JAMES-WEST PALM, INCORPORATED**

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

R. JOHN COLE, II, ESQUIRE  
46 NORTH WASHINGTON BOULEVARD, SUITE 12  
SARASOTA, FLORIDA 34236

  
JAMES V. MONTONEY

Date: 1-31-96

Title: INCORPORATOR

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.

  
Registered Agent

DATE: 1-30-96

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA