

P96000 102257

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

ENTERED
1-1-97

FILED
96 DEC 18 AM 11:04
TALLAHASSEE, FLORIDA

SUBJECT:

L. LYNN KRAUM

(Proposed corporate name - must include suffix)

900002032719--4
-12/18/96--01031--017
****131.25 ****131.25

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

L. LYNN KRAUM

Name (Printed or typed)

111 CAMAREE PLACE

Address

PENSACOLA, FLORIDA 32534

City, State & Zip

904-484-6857

Daytime Telephone number

DEC 19 1996

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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:

L. LYNN KRAUM INC. 1-1-97

ARTICLE II PRINCIPAL OFFICE

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

1111 CAMAREE PLACE
PENSACOLA, FL. 32534

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ARTICLE III SHARES

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

1,000 SHARES AT \$1.00 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

L. LYNN KRAUM
1111 CAMAREE PL.
PENSACOLA FL. 32534

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

L. LYNN KRAUM
1111 CAMAREE PLACE
PENSACOLA FLORIDA 32534

ARTICLE VI EFFECTIVE DATE

THE EFFECTIVE DATE OF INCORPORATION
SHALL BE 1-1-97

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

12 day of DECEMBER, 19 96.

(An additional article must be added if an effective date is requested.)


Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
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 L. LYNN KRAUM INC.

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

L. LYNN KRAUM
(NAME)

1111 CAMAREE PLACE
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

PENSACOLA FL 32534
(CITY/STATE/ZIP)

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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.

L. Lynn Kraum
(SIGNATURE)

12-12-96
(DATE)