

P96 0000 10763
TRANSMITTAL LETTER

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

SUBJECT: FOAM WONDER WALL, INC.
(Proposed corporate name - must include suffix)

TELEPHONE 904-644-0111
-02/01/96 - 01010 - 013
****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: Gordon McKINNON
Name (printed or typed)

119 S. OREGON AVE
Address

TAMPA, FL. 33606
City, State & Zip

813-251-1881
Daytime Telephone number

FILED
95 JAN 31 PM 4:15
DIVISION OF STATE
CORPORATIONS
TALLAHASSEE, FLORIDA

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

G3 2/2/96

ARTICLES OF INCORPORATION

FILED
96 JAN 31 PM 4:15
CLERK OF STATE
TALLAHASSEE FLORIDA

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:

Foam Wonder Wall, Inc.

ARTICLE II PRINCIPAL OFFICE

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

119 S. Oregon Avenue
Tampa, FL 33606

ARTICLE III SHARES

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 STREET ADDRESS

The name and address of the initial registered agent is:

Karen S. McKinnon
623 Bosphorus Avenue
Tampa, FL 33606

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):

Gordon McKinnon
190 Blanca
Tampa, FL 33606

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

8 day of January, 19 96



Signature

Signature

Signature

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: Foam Wonder Wall, Inc.

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

Karen S. McKinnon

(NAME)

623 Bosphorus Avenue

(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Tampa, FL 33606

(CITY/STATE/ZIP)

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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 performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Karen S. McKinnon
(SIGNATURE)

Jan 8, 1996
(DATE)