

TRANSMITTAL LETTER

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

SUBJECT: _	PINELLAS BLIMPIE INC
	(proposed corporate name)
Enclosed is ar for \$122.50	n original and one (1) copy of the articles of incorporation and our check
FROM:	SANDRA HIMBER CPA Name (printed or typed) 612 OLEANDER WAY SOUTH
	ST PETERSBURG FL 33707 City, State, & Zip
	(813) 345-4639 Telephone Number

4000001718144 -02/19/96--01055--022 ****122.50 ****122.50

Note: Please provide the original and one copy of the Articles.

TALLABASSET	96 FEB 19	\$ (0) (0) (0) (0) (0) (0) (0) (0) (0) (0)
FELORIDA STATE	£11 9:49	erin

ARTICLES OF INCORPORATION

FILED

QE

96 FEB 19 All 9:49

PINELLAS BLIMPIE INC

SECRETARY OF STATE FALL AHASSET 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:

PINELLAS BLIMPIC INC

ARTICLE II PRINCIPAL OFFICE

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

13013 66TH STREET NORTH LARGO FL 34643

ARTICLE III CAPITAL STOCK

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

HAMID R MARZBAN 307 15TH AVENUE INDIAN ROCKS BEACH FL 34635

ARTICLE V INCORPORATOR(8)

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

HAMID R MARZBAN 307 15TH AVENUE INDIAN ROCKS BEACH FL 34635

GHOLAM R MARZBAN 14853 58TH STREET NORTH CLEARWATER FL 34620

The under	signed inco	rporator(s) has(have) execut	ed these A	rticles of Ir	ncorporation this
1	6тн	day of	FEBRUARY	, 19	66	
			. G. Mar Sig	de-		
			Sig	nature		
			HRM qu Sig	nature		
			Sia	nature		

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

t

Pursuant to the provisions of sections 607.0501 or 617.0501, 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:	PINE	LLAS BLIMPII	I INC	
2.	The name and address of the registered	agent a	nd office is:		•
	HAMID R MARZBAN				
	(NAME)			1	10
	307 15TH AVENUE) . 	
	(P.O. BOX <u>NOT</u> ACC	EPTABL	E)		1.5
	INDIAN ROCKS BEAC	H FL	34635		AND CO
	(CITY/STATE/	ZIP)		Ç	
					是刑事
TH AN PR FO	AVING BEEN NAMED AS REGISTERED OCESS FOR THE ABOVE STATED CORI IS CERTIFICATE, I HEREBY ACCEPT THE DESCRIPTION OF ACT IN THIS CAPACITY. OVISIONS OF ALL STATUTES RELATING THE RESERVENCE OF MY DUTIES, AND I AM FAIR ONS OF MY POSITION AS REGISTERED	PORATIC IE APPO I FURTH G TO TH AMILIAR	ON AT THE PLA INTMENT AS F ER AGREE TO LE PROPER AN	CE DESIGI REGISTERE COMPLY V	NATED IN D AGENT WITH THE
	SIG	NATURE	21/6/90		
	DA	TE <u></u>	21/6/90	<u> </u>	