

P96000019199

TRANSMITTAL LETTER

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

FILED
96 MAR -1 PM 1:27
TALLAHASSEE, FLORIDA

000001729170
-03/01/96--01022--014
****131.25 ****131.25

appenzacola
SUBJECT: MEDIATORS INC.
(Proposed corporate name - must include suffix)

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: C. V. FORD, JR.
Name (printed or typed)

P. O. BOX 386
Address

GULF BREEZE, FL 32562
City, State & Zip

(904) 932-3600
Daytime Telephone number

*789,503,671
7896-4667*

*Pickup
AT 11:00*

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

D. BROWN MAR - 1 1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

RECEIVED

96 MAR -1 PM 1:07

DIVISION OF CORPORATIONS

March 1, 1996

C. V. FORD, JR.
POST OFFICE BOX 386
GULF BREEZE, FL 32562

SUBJECT: MEDIATORS, INC.
Ref. Number: W96000004662

We have received your document for MEDIATORS, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6972.

Doris Brown
Document Specialist

Letter Number: 896A00009179

Pickup
2:00

ARTICLES OF INCORPORATION

FILED
96 MAR -1 PM 1:27
SECRETARY 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:

of PENSACOLA
MEDIATORS, INC.

ARTICLE II PRINCIPAL OFFICE

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

20 EAST GARDEN STREET
PENSACOLA, FL 32501

ARTICLE III SHARES

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

One Hundred (100)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

C. V. FORD, JR.
20 East Garden Street
Pensacola, FL 32501

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):

G. V. FORD, JR., 20 EAST GARDEN STREET, PENSACOLA, FL 32501

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

28th day of February, 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.

FILED
MAR - 1 PM 1:27
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

1. The name of the corporation is: of PENSACOLA
MEDIATORS INC.

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

C. V. FORD, JR.
(NAME)

20 EAST GARDEN STREET
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

PENSACOLA, FL 32501
(CITY/STATE/Zip)

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.


(SIGNATURE)

2-28-96
(DATE)